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Deanna M. Mason

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FINDING MYSELF: THE MATURATION OF SPIRITUALITY AND ITS
INFLUENCE ON BEHAVIOR DURING LATE ADOLESCENCE

by

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A Dissertation

Submitted to the Graduate Faculty

of the

University of North Dakota

In partial fulfillment of the requirements

for the degree of

Doctor of Philosophy

Grand Forks, North Dakota
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ABSTRACT

The purpose of this grounded theory study was to develop a theoretical model describing the influence of spirituality and/or religiosity on late adolescent behavior. Multiple quantitative research studies have linked spirituality and/or religiosity with both decreased health-risk behaviors and increased health-promotion behaviors during adolescence. However, as reductionist methods have not revealed underlying reasons for these relationships, the ability to apply this knowledge to practice is limited. Additionally, there is a lack of clear definitions for spirituality and/or religiosity firm enough to bridge disciplinary boundaries. A qualitative research perspective, which takes into account the embodied experience and development of individuals during late adolescence, is needed to discover meaning, beliefs, and practices that can inform why the relationships between spirituality and/or religiosity and health-risk and health-promotion behaviors exist.

Research questions were structured to discover both the maturation of spirituality during late adolescence as well as the areas of influence spirituality and/or religiosity had on behavior during late adolescence. Blumer's Symbolic Interactionism and embodiment were the conceptual lenses informing the study. Twenty-one adolescents, age 16-21 years, from two international educational institutions in central Spain and one non-profit after-school program in the United States for high-risk adolescents were interviewed electronically by email. A grounded theory research design was used to analyze the data.

From this analysis, a theoretical model emerged with a core concept of *finding myself* that represents four core process concepts with *in vivo* titles: (a) *humans need a guide*, (b) *what drives me*, (c) *I have resources*, and (d) *sensing this human spark and effects on my development*.

Implications of this study are threefold: (a) the use of electronic recruitment and email interviewing of late adolescent populations is an effective method to increase access to the population under study and reduce power differentials during the research process; (b) late adolescents are aware of their personal spiritual maturation as well as its influence on health; therefore the continued exploration of this phenomenon regarding adolescent health is warranted; and (c) the use of an embodied perspective when investigating adolescent health can illuminate information previously concealed by reductionist research methods.

CHAPTER I

INTRODUCTION

"Science without religion is lame, but religion without science is blind" – Albert Einstein

Improved health of late adolescents has frequently been found to be related to an individual's "spirituality" and/or "religiosity" (Rew & Wong, 2006), but no firm knowledge exists on why this is so. Spirituality has been recognized as a universal human dimension every individual, whether religious, humanist, hedonist, or atheist maintains (Broccolo, 1990; Neuman, 1995). Yet, in an extensive literature review the categories of religiosity and spirituality were measured by attendance or participation in religious activities or services, composite or generic measures of religiosity, religious importance, and religious denomination or affiliation (Rew & Wong). No studies reviewed measured spirituality independently of religious connotation; spirituality was not investigated without connection to religious practices.

The relationship between spirituality and/or religiosity and adolescent health has been explored extensively by individual scientists, and in 2008, the National Institutes of Health began funding research to investigate the relationship more closely. Yet, difficulties in distinguishing between the terms religiosity and spirituality continue to confound discussions relating the terms to specific research or disciplines. Definitions of these terms have evaded conceptual analysis; existing definitions are not firm enough to

be defined by individual disciplines, let alone strong enough to cross disciplinary boundaries (Rubin, Desai, Graham-Pole, Dodd, & Pollock, 2009). In spite of a great deal of attention, a clear definition of spirituality or religiosity has eluded researchers and made it difficult to use or measure spirituality and religiosity as standard universal concepts (O'Connell & Skevington, 2005).

The profession of nursing is interested in the human health experience (Newman, 1995) and has maintained a commitment to meeting the biological, psychological, emotional, and spiritual needs of patients (Dossey & Dossey, 1998). Therefore, nursing is in a prime position to investigate the role of spirituality within the maturation process of late adolescence from the adolescent perspective. The International Council of Nurses (2000), the American Nurses Association (2002), the American Holistic Nurses Association (2007), and the North American Nursing Diagnosis Association (2001) have all compiled statements regarding a nurse's role in promoting an environment which respects a patient's spirituality and religious practices while receiving care. For example, a recommendation of the American Association of Colleges of Nursing is that graduating baccalaureate nurses have the ability to assess spiritual needs of a patient and incorporate spiritual care into their patient care regimen. Similarly, spirituality is a component of nursing care plans with "risk for spiritual distress" and "readiness for enhanced spiritual well-being" being included in the classifications of nursing interventions by the North American Nursing Diagnosis Association. Additionally, standards by the American Nurses Association charge nurses to include a spiritual dimension in their assessment of a patient's condition.

An increased knowledge of how spirituality and/or religiosity influence the maturation process of late adolescence can assist nurses in integrating these mandates into their nursing practices among adolescent populations.

Current health care policy and codes of conduct direct nurses to deliver appropriate spiritual care in healthcare settings. In 1998, the World Health Organization proclaimed that health needs should include spiritual well-being in addition to physical, mental, and social domains (Cavendish et al., 2004; Plianbangchang, 2007; Shih, Gau, Mao, Chen, & Lo, 2001). Additionally, the American Association of Colleges of Nurses and the Joint Commission on Accreditation of Healthcare Organizations have stated that a responsibility of nursing education is to prepare nurses to identify spiritual distress and provide spiritual care (Meyer, 2003). These changes at the policy level can only come to fruition when a better understanding of spirituality and/or religiosity is known, including whether or how they are related. Additionally, identifying their influence on health is needed, particularly whether or not spirituality and/or religiosity is an important health factor in the maturation process of late adolescents.

Purpose

The purpose of this qualitative, grounded-theory study was to develop a theoretical model describing the influence of spirituality (including meaning, beliefs, and practices) on late adolescent behavior. Late adolescence is defined in the literature as extending between the ages of 16 to 26 years (Brown et al., 2008; Kendler, Gardner, Annas, & Lichtenstein; Schwartz, Maynard, & Uzelac; Selfhout, Branje, & Meeus, 2009; Wu & Chiou, 2008). During this exploration of the developmental stage of late

adolescence, changes in aspects of spirituality and/or religiosity in maturing adolescents were examined.

The findings of this research validate past research and serve to guide future research aimed at creating interventions for enhancing health in late adolescence by decreasing health-risk and increasing health-promotion activities. The discovery of how late adolescents assign meaning to spirituality and/or religiosity through the interactions and interpretations of life events will inform researchers on how those assigned meanings or ideas about spirituality influence beliefs and practices of late adolescents, which then translate into late adolescent behavior. Determining how late adolescents assign meaning to spirituality and/or religiosity requires researchers to study basic social processes between late adolescents and their peers, the adults in their community, the community itself, and the surrounding environment. Together, these areas of social interaction provide the contextual environment which creates meaning (Kohls, 1996; Pollock & Van Reken, 2001), including for late adolescents. Additionally, ascertaining the meaning late adolescents ascribe to spirituality and religiosity as they mature informs the relationship between religion and spirituality during this developmental period. Late adolescents are faced with new situations daily stemming from their continued development and increasing autonomy. Significant adults, such as parents and teachers, peer groups, and communities send messages to late adolescents to direct their behavior; yet, individual late adolescents have the ability to reason in an abstract fashion, and they have greater autonomy to choose their individual behavior than younger children do. This study focused on the influence of spirituality during late adolescence, and based the idea of

spirituality on the meanings, beliefs, and practices late adolescents employ to make decisions regarding their behavior. In essence, the purpose of this research was to understand how spirituality “works” for the adolescent and the effect it has on health.

Background

Religiosity and Spirituality

Improved health outcomes have been associated with increased spirituality and religiosity in adolescent populations (Benjet et al., 2007; Bergman, Brown, & Wilson, 2008; Callaghan, 2005; Cerqueria-Santos, Koller, & Wilcox, 2008; Fehring, Brennan, & Keller, 1987; Holder et al., 2000; Hurd & Zimmerman, 2010; Resnick, Harris, & Blum, 1993; Rew & Wong, 2006; Ritt-Olson et al., 2004; Stewart, 2001; Tartaro, Luecken, & Gunn, 2005; Walker & Bishop, 2005). Additionally, multiple disciplines are studying the impact of spirituality and religiosity on adolescent health, including, but not limited to, nursing, theology, education, psychology, and medicine. Spirituality is an innate part of every person (Broccolo, 1990; Neuman, 1995); yet, clear definitions of spirituality and religiosity firm enough to cross disciplines and merge isolated bodies of knowledge are absent in the literature (Delgado, 2005; Florczak, 2010). The interdisciplinary interest in identifying the influences these concepts have on an individual’s health provides just cause to evaluate religiosity and spirituality in modern health care.

Absent from the literature is information on what spirituality means to late adolescents. The meaning of personal spirituality will affect the beliefs and practices of late adolescents. Additionally, due to a lack of clear definitions, it is important to know if late adolescents distinguish their spirituality as separate from religiosity or as the same.

Knowing what spirituality means to adolescents helps us understand how late adolescent beliefs regarding spirituality influence their behaviors and practices, including avoidance of health-risk behaviors and engaging in health-promotion behaviors. Currently, the literature addresses religiosity and spirituality from an etic perspective and does not address the beliefs or meanings of spirituality and religiosity within the context of late adolescence. Therefore, it is unknown how late adolescents view the concepts of religiosity and spirituality, if they view them as related or separate, or what meaning they ascribe to them. Without this knowledge of context, it is unclear what relationship exists between a late adolescent's spirituality, religiosity, and behavior.

Religiosity

In nursing research, as well as many other disciplines, religion has been defined as an organized system of behavior practices to assist in closeness to God or a higher power (Cotton, Zebracki, Rosenthal, Tsevat, & Drotar, 2006; Holder et al., 2000; Kenny & Ashley, 2005; Moreira-Almeida & Koenig, 2006; Salsman, Brown, Brechting, & Carlson, 2005). Additionally, this concept has been subdivided into public and private religiosity. To illustrate, attending communal worship demonstrates public religiosity and practicing private prayer or meditation demonstrates private religiosity (Nonnemaker, McNeely, & Blum, 2003). Public and private activities of religiosity have been researched to identify their relationship to health-risk behaviors such as sexual activity, drug use, and alcohol use in adolescent populations (Benjet et al., 2007; Bergman et al., 2008; Bersamin & Walker, 2006; Cerqueria-Santos et al., 2008; McCree, Wingood, DiClemente, & Harrington, 2003; Sim, Jordan-Gree, & Wolfman, 2005).

Self-administered questionnaires and structured interviews have been used as data collection techniques for capturing aspects of adolescent religiosity and the respective high-risk behavior under investigation; then, descriptive statistics have been used to quantify the data (McCree et al., 2003). In one study, McCree and colleagues created a questionnaire asking questions such as, How often do you... (a) Attend religious or spiritual services; (b) Pray or meditate; (c) Talk to others about religious or spiritual concerns; and (d) Talk with a religious or spiritual leader (minister/priest)? These questions were scored on a four-point Likert scale from “never” to “often.” After questionnaires were administered, structured private interviews were given to participants evaluating sexual activity, including: (a) age the adolescent first had willingly consented to sex, (b) frequency of sexual communication, (c) condom use, (d) feelings of ability to discuss sexual topics with their sexual partner, (e) feelings about ability to refuse unprotected sex, and (f) personal attitudes about condoms. The investigators did not ask the adolescent participants if they perceived a link between religious practices and sexual activity; instead, the structure of the study implied the relationship already existed. Similarly, Sim and colleagues (2005) used focus groups of parents of adolescents to identify parent perceptions of existing protective factors against early substance use. Results from focus groups showed that parents perceived church attendance as a positive factor in reducing risk because they believed church provided a positive community environment, positive activity involvement, pro-social interaction with peers, and an avenue for parental monitoring. In this study, researchers did not investigate the adolescent children of parents interviewed for an adolescent perspective on the role of

church attendance. Therefore, study results related how parents, rather than adolescents, viewed church attendance.

Spirituality

Beginning with Florence Nightingale, nursing has viewed spirituality as an innate component of every human (Dossey, 1998; Nightingale, 1974; Shelly & Miller, 1999). Spirituality in nursing, and other professional literature, is defined as the private search to questions about life, being, and the relationship to others, that may or may not involve a particular religious denomination or higher power (Cotton et al., 2006; Elkins & Cavendish, 2004; Holder et al., 2000; Houskamp, Fisher, & Stuber, 2004; MacDonald, 2000; McSherry & Smith, 2007; Moreira-Almeida & Koenig, 2006). Green (2008) poignantly states the need to include, “ ‘the other,’ broadly represented as the transcendental God” (p. 60) in definitions of spirituality or be faced with a more psychological focus of social and emotional literacy which deals with feelings. This perspective has been echoed by Rex Smith (2009), who writes about spirituality’s broadness, thus allowing for embodiment and expression in all persons regardless of religious affiliation; yet, discussions regarding only meaning, purpose, and connection are not spiritual care, but are elements of psychosocial care. Therefore, assessment of the meaning of spirituality from the population under study is relevant to this research in order to clarify late adolescent beliefs and practices regarding spirituality and to understand how and if these spiritual beliefs and practices are related to behavior.

Intersection of Religiosity and Spirituality

A review of literature reveals there are no definitions of religiosity or spirituality comprehensive enough to cross disciplines (Delgado, 2005; Florczak, 2010). Moreover, there is no consensus in the literature on how religiosity and spirituality relate to each other (Holder et al., 2000). Hodge (2000) identifies religiosity as a practice framework within the larger sphere of spirituality. Religiosity is described as the communal or personal rituals and practices a person uses that are reflective of a specific religious faith or community to express his or her spirituality (Elkins & Cavendish, 2004; Houskamp et al., 2004; Moreira-Almeida & Koenig, 2006). Spirituality is a concept that eludes clear definition, but Murray and Zentner's (1989) definition is well articulated,

[Spirituality is] A quality that goes beyond religious affiliation, that strives for inspiration, reverence, awe, meaning and purpose, even in those who do not believe in any good. The spiritual dimension tries to be in harmony with the universe, strives for answers about the infinite, and comes into focus when a person faces emotional stress, physical illness or death. (p. 259)

The omission of a reference to God or Higher-Power leaves this definition broad enough to define "good" as a moral base or ethos for individuals who do not affiliate themselves to a particular religious organization, denomination, or practice. In this way, persons who do or do not associate themselves with specific religious faiths or communities can experience and practice their innate spirituality.

The interrelatedness between definitions of spirituality and religiosity invites further investigation of the relationship between religiosity and spirituality. Ultimately,

questions of spirituality may be more philosophical or theological than scientific leaving the religious behaviors easier to capture and explain due to their concreteness versus the obscure and abstract spiritual concept (Clarke, 2009). The concepts of religiosity and spirituality may be problematic to pinpoint as exclusive entities because they have been subjected to reductionism within the positivistic culture of Western medicine (Emmett, 2008). It is plausible that reductionism has been used to the extent that now there is a myopic view of these concepts; and therefore, the ability to define them for practical application has been lost.

An epistemological discussion can provide clarity to the distinctions made between religiosity and spirituality in nursing by discussing these concepts in terms of holism and embodiment. Noting the differences between holism and embodiment in the definitions of religiosity and spirituality will highlight the need to view these concepts during late adolescence as a process under constant change rather than a stagnant entity. Late adolescents are maturing, striving to meet developmental tasks linked to autonomy and self-determination, which affects how late adolescents interpret spirituality and religiosity. The late adolescent's emic perspective on what spirituality and religiosity are and what that means to them provide contextual information to understand what influence they have on behavior, including health-risk and health-promotion behaviors.

A Holistic Perspective

Holism is a term derived from the Greek word 'holos' which means all, entire and total (Morwood & Taylor, 2002). Commonly understood, the concept of holism means the whole is greater than the sum of its parts (American Nurses Association, 2004;

Griffin, 1993, Ham-Ying, 1993, Kozier & Erb, 1990, Smuts, 1926) Similarly, wholes have certain assets which will not tolerate any reduction to their constituent parts, if such a “whole” were to be reduced to its constituent parts, it would no longer be the same “whole” or the same item (Hume, 1993/1777, Woods, 1998)

Several nursing scholars have linked holism with nursing (Levine, 1969, Neuman, 1995, Watson, 1985) Holism is a central concept in nursing care as nurses connect with patients through subjective and objective data collected during patient interactions This information, in discrete bits, is used to formulate a universal picture of the patient Levine (1969) describes this open and fluent characteristic of nursing care well by stating, “separation has made it possible to explore the complexities of living organisms, but every insight has added to the insistence that the disparate parts be made whole once more” (p 94)

Holism, as a concept, entered nursing literature during the 1960’s at the same time modern medical advances and specialization became prevalent Nursing embraced holism because the concept fit well with the mechanisms of changing health care Nurses sought to create structure in nursing care and move away from relational forms of care (Hartrick, 2002), as they collected data for the physician, the physical therapist, the nutritionist, the respiratory therapist, and the myriad of other specialists, while trying to persist in seeing the patient as a whole person “Holism is the view that reality is comprised of wholes, that is, that nature, through and through consists of natural kinds” (Kolcaba, 1997, p 290) The nurse defined different wholes depending on what

information was needed. Still lacking is information to delineate where wholes are defined and limited.

The Myth of Reductionism and Empiricism

Reductionism and empiricism are theories describing two types of inquiry viewing the world through experience and simplification to the smallest terms. Reducing existence to experience has been valuable in scientific inquiry and presented as logically correct. Yet, in light of the human experience, reductionism and empiricism lack continuity. Defining wholes as related to human experience becomes difficult. Experiences resist reduction. Furthermore, after reduction and examination, the reconstructed experience is not the same as the original whole. The use of holism in nursing mandates the reduction of the person into parts; at some point, part of the person is lost never to be reclaimed. To understand how this loss occurs, the basis of reductionism and empiricism are presented from their epistemological foundations.

Modern philosophers – Descartes, Locke, and Hume – wrote specifically about reductionism; to them empiricism and reductionism uncovered unbiased truth. René Descartes (1596-1650) was a modern philosopher who engaged in mental reductionism to attempt to uncover unconditional truths during a period of metaphysics. He created a form of thinking that was clear and rational, attempting to become devoid of assumptions or emotional beliefs (Descartes, 1993/1641). Descartes' most famous phrase in Latin, "Cogito ergo sum," is translated to "I think, therefore I am," and formed the dualist perspective in which Descartes believed the mind and body to be distinct (Descartes, 2005/1641). To his understanding, thought lives independently of the body. Thought is

all a person can know as being real and with thought a person knows they are real; everything else may be a myth, but thought proves existence (Descartes, 2005/1641).

From the writings of Descartes, John Locke (1632-1704) continued to question the ability to have knowledge of experience and to have an identity based on the human body. Locke accepted Cartesian dualism and claimed it was beyond human power to understand the inner nature of the mind, as well as the body, because their power was completely hidden from observation (Locke, 1995/1689). Locke was unable to deduce the distinction between the ability of the human body to experience experiences and that of the actual experience (Locke, 1996/1689).

David Hume (1711-1776) viewed existence to be the same as an idea of existence (Hume, 1969/1739). For Hume, all ideas of the mind formed from perceptions and he hypothesized, it was impossible for the mind to conceive things that had not somehow been previously perceived or experienced. Going a step further, Hume identified the human characteristics of love, hate, thinking, feeling, and seeing all as the simplicity of perception (Hume, 1969/1739). In this sense, the experiences of the body linked to the perceptions of the mind. Therefore, identity vanishes as the self is reduced to a bunch of perceptions; the actual experience being separate from the experience perceived in the mind (Hume, 1993/1777).

The dualist views of Descartes, Locke, and Hume presuppose that what the body experiences and what actually occurs are two disconnected things. Furthermore, their viewpoints do not take into consideration time as a germane factor related to experience. The reduction of experiences away from all other experiences, including time, contradicts

the principle of the whole being greater than its parts, the core tenet of holism. Reducing experience from context, person from body or body from mind undermines this fundamental principle of holism. Moreover, when recombined after reduction, there is a loss of value. To reduce is to diminish, despite the drive for clarity, the desire to be unbiased, or to revel in the non-emotional.

Gadow (1980) poignantly states the flaw of dualism, which includes empiricism and reductionism,

Dualism is the high divide we have climbed in order to see farther, but it is a place where nothing lives, where everything can be viewed in all directions but nothing can be touched. The world is remote and we are outsiders looking on. (p. 211)

Reductionism, ignorant of the interrelationships that exist in the world, aspires to separate concepts in search of a singular essence (Rodgers, 1989). Perhaps attempting to reduce spirituality from religiosity, or religiosity from spirituality, has moved nursing to a place where everything is visible, but untouchable. To be untouchable also renders the information useless as there is no context for application.

The Holism of Religiosity and Spirituality

The body and spirit were seen as intimately related throughout history; medical healers were linked with spiritual healers until the middle third of the twentieth century (Josephson & Dell, 2004; Sexson, 2004). At this point, western medical and scientific traditions split religiosity and spirituality from physical health (Brown, 2001; Rex Smith, 2009; Sexson). Nursing was not removed from this change. Nursing education entered academia through natural science departments; the heavy influence of positivism

infiltrated nursing research and theory as a byproduct and thus also influenced nursing practice (Hartrick, 2002; Shelly & Miller, 1999). The use of positivistic models in theory and research made it difficult to measure the meaning of concepts like religiosity and spirituality. As a result, in this positivistic culture, nurses paid less attention to patient perceptions of spirituality and religiosity or to how spirituality and religiosity influenced a patient's actions.

The tide is turning; in the past 20 years, religiosity and spirituality have received renewed attention for their impact on physical and emotional health. Yet, the heavy use of positivism in nursing and other social sciences has further reduced and divided these concepts into separate entities in the pursuit of identifying their definitions and essence (Cotton et al., 2006). Currently, the focus on adolescent health and the relationship of health to religiosity and spirituality has been correlated using single-measures (Brown, 2001; Rew & Wong, 2006). The use of questionnaires and structured interviews as methods for collecting data limits the late adolescent's responses about what the phenomenon is, as well as what it means to them. Restricting adolescent responses through structured questions contained in an interview guide also limits the range of data collected. Other pertinent information providing contextual information or variation may be inhibited by such methods.

More importantly, little is known about the process of spiritual development and how religiosity and spirituality affect adolescent behaviors and influence health-risk and health-promotion responses (Cotton et al., 2006). Exploration of the influences of spirituality and/or religiosity on late adolescent behavior, particularly related to changing

developmental tasks, needs to include an understanding of their meanings to late adolescents. Additionally, spirituality's and/or religiosity's influence on the beliefs and practices in everyday life as well as where and how adolescents learn to use spirituality and/or religiosity to regulate their behavior needs to be investigated. This knowledge can open a greater understanding of how these concepts relate to adolescent behavior.

Reductionism may assist in illustrating a relationship exists between spirituality, religiosity and behavior, but with no understanding of how or why it occurs. This is a cardinal flaw in applying holism to the concepts of religiosity and spirituality in late adolescent health. Acknowledging that concepts are an integral component of a person via holism without insight of how these concepts relate to the other elements of the person is a form of reductionism that diminishes the whole.

Nursing process strives to maintain wholes in patient care. Likewise, nursing philosophy and theory embrace holism as central tenets needed to define a patient system and nursing's role related to it. For the purposes of dialog and critique of theory and philosophy, wholes must be defined, but definition creates an inherent gap. The experience remains removed from the perspective of the one experiencing it, time and movement are regulated to a secondary position, and meaning is lost. Most importantly, the experience is being evaluated by someone external to the experience and not by the person who experienced it. In this manner, reductionism persists and the essence of the whole is lost.

An Embodied Perspective

Embodiment is the concept that intelligence cannot exist in a state of abstraction, but requires a physical presence; to humans this means a body (Pfeifer & Scheier, 1999). Modern ideas of embodiment are related to the writings of contemporary German philosopher, Martin Heidegger (1889-1976), and contemporary French philosopher, Maurice Merleau-Ponty (1908-1961). Martin Heidegger (1926/1962) identified the human being as different from other entities; the major defining characteristic being a human has a relationship with the self. The ability to have a relationship with oneself and the external world, including the environment, is what creates reality for each person. Heidegger was clear to distance himself from the dualist perspective of Descartes and clearly stated that Descartes had his prime supposition reversed.

If the '*cogito sum*' is to serve as the point of departure for the existential analytic of Dasein [the entity of man], then it needs to be turned around, and furthermore its content needs new ontologico-phenomenal confirmation. The '*sum*' is then asserted first, and indeed in the sense that "I am in the world." As such an entity, 'I am' in the possibility of Being towards various ways of comporting myself – namely, *cogitations* – as ways of Being alongside entities within-the-world.

Descartes, on the contrary, says the cogitations are present-at-hand, and that in these an ego is present-at-hand too as a worldless *res cogitans*." (Heidegger, 1926/1962, p. 254)

Heidegger posits existence in the world is confirmed through experiencing being in the world. To Heidegger, being in the world is dependent on understanding what being in

the world is; “the substance of man is existence.” (Heidegger, 1926/1962, p. 255) To view existence as separate from the experience perceived by being in the world, and time, would be to inhabit a worldless experience.

Merleau-Ponty studied Heidegger’s philosophy and was influenced by his writings about the body. Merleau-Ponty did not distinguish the body as separate from the world but saw the body and the world as intimately bound together; “...the fact that we are our body....we are in the world through our body, and in so far as we perceived the world with our body.” (Merleau-Ponty, 1956/1945, p. 239)

Both Heidegger and Merleau-Ponty identified a new way of viewing existence, which stretched beyond the singular person to place existence in the larger framework of time and boundless connectedness with others. This inclusive stance more accurately represents the natural human progression through life. Humans are not born into life in solidarity nor do humans live in solidarity; but as humans, there is a natural drive for contact, connection, and continuance. Embodiment provides a philosophical stance that considers these human needs when examining experience.

Sartre (2007/1947) moved this discussion forward through his description of existence as a demonstrative expression of the self.

Man is not only that which he conceives himself to be, but that which he wills himself to be, and since he conceives of himself only after he exists, just as he wills himself to be after being thrown into existence, man is nothing other than what he makes of himself. (p. 22)

Sartre uses this description of embodiment to project the responsibility of each individual in the formation of the self and the larger community. Humans are in the world, among others, according to Sartre, from the moment of birth, through life and work, until death. This reality is subjective and objective simultaneously, objective in the sense that actions of the individual affect everyone and are evident to everyone and subjective because those actions are experienced and are meaningless if the person making them does not define him/herself and his/her existence in relation to them (Sartre, 2007/1947). This becomes important when defining human universality, not as a given situation, but as a project under construction based on the actions of each individual within his or her social context, the interactions each chooses to make or not to make. The existence of human life only takes form when a choice is made, an action taken, whether passive or active, and humans give these actions meaning and value, this is what creates human community (Sartre, 1984/1943).

Ultimately, Sartre (1984/1943, 2007/1947) summarizes, each human is independently responsible for his or her choices, made alone through interactions with others, in an attempt to reach beyond himself or herself, into the community and society, to reach goals. This social interaction, through process linked to time, defines the humanity of each person.

This sentiment is echoed by contemporary writer Wendell Berry (1987, 2002) who urges humanity to take a reflective look at the interrelations between personal actions and the larger community (and world) by acknowledging the interrelationship of all actions, the ripple of influence of an action that extends to infinity, and the unmovable

influence of time. Berry (1987) remains steadfast in his position that the individual, as separate from relationships, community, and time, is not possible. The individual, by definition, "...consists of both its individuality and community. A part of its properly realizable potential lay in its community, not in itself." (Berry, 1987, p. 115) In this respect, people who know, love, and depend on an individual person, mediated by the social interactions between that person and others, realize that identity, and therefore value, exist as an individual person. Berry makes these arguments from a personal level all the way up through communities, governments, and economies. The individual is realized only in the social process in which it has existence. To understand an individual's place is to understand the interactions between the individual and the social interplays they engage in. Social processes related to an individual create placement, value, order, and, most importantly, identification of what the individual means and stands for. Berry (2002) articulates this well stating:

No matter how much one may love the world as a whole, one can live fully in it only by living responsibly in some small part of it. Where we live and who we live there with define the terms of our relationship with the world and to humanity. We thus come again to the paradox that one can become whole only by the responsible acceptance of one's partiality. (p. 118)

Berry, like Sartre, makes a clear distinction between thinking and action; thinking is nothing and only becomes actualized when action occurs (Berry, 2002). Therefore, the division of thought from action is a form of reductionism that destroys a piece of the person being divided. Only through the embodiment of thoughts, actions, and meanings

manifested in the interactions of a human being with the greater world, which is intimately linked with time, can there be a common humanity. The process that occurs to create this reality is the definition of the individual, community, government, or economy and resists reduction to prevent loss of meaning.

The Embodiment of Religiosity and Spirituality

Embodiment, as a philosophy, asserts actions are inseparable from the motivations behind them. The embodied experience is derived only when actions are understood as well as choices available to an individual prior to an action. A child-centered approach to religious or spiritual embodiment holds that behaviors and beliefs of a child are relevant and necessary for a child to be able to use his or her spiritual coping mechanisms (Brown, 2001). Therefore, to understand the processes and meaning of religiosity and spirituality in the lives of adolescents, it is imperative not to separate these concepts from the context in which they are present. Frank and Kendall (2001) suggest it is important to seek individual perceptions of an issue as opposed to focusing on only objective indicators related to religiosity and spirituality to understand the totality of an action.

Forms of investigation are present that allow the subjectivity of the individual to inform objective findings. Carper (Carper, 1978) identified fundamental patterns of knowing which included other ways of knowing beyond empirical knowledge; Carper embraced empiricism with the same level of significance as personal knowledge, ethical knowledge, and aesthetical knowledge. Together, these four types of knowledge embrace

the interrelatedness of the nurse and patient Carper explained her preposition for this stance,

It is the general conception of any field of inquiry that ultimately determines the kind of knowledge that field aims to develop as well as the manner in which that knowledge is to be organized, tested, and applied Such an understanding involves critical attention to the question of what it means to know and what kinds of knowledge are held to be of most value in the discipline of nursing (p 13)

The use of the human body, embodied, is the most advanced tool in the pursuit of knowledge because the subjective is not denied, this perspective is continuous with the premises of Goethean science (Hartner, 1968, Kaufmann, 1980, Steuer, 2002, Whitelegg, 2003, Wilkinson & Willoughby, 1962), expressed nearly 200 years earlier Johann Wolfgang Goethe (1749-1832) was a poet, modern philosopher, and scientist He maintained the need to respect both the object under study as well as the investigator in scientific investigations Both Carper and Goethe bring recognition to the need to frame science in terms of that are of value to both the scientist and the researcher.

Continuing to follow a path that increases the number of conceptual models and measures of religiosity and spirituality in the literature will impede understanding of the actual nature and construct of these concepts (MacDonald, 2000) Many models and measures are perceivably valid, but none address the emic perspective of the adolescent in regard to how they organize or describe these concepts (Cotton et al , 2006)

Changing focus from dissecting religiosity from spirituality to investigating the meaning

religiosity and spirituality have in the maturation process of late adolescents may show how spirituality and religiosity influence actions during this developmental period.

Numerous authors have written about the parallel nature of religious and spiritual development with psychosocial and cognitive development in children and adolescents (Elkins & Cavendish, 2004; Fowler & Dell, 2004; McSherry & Smith, 2007; Smith & McSherry, 2004; Steen & Anderson, 1995). Yet, a lack of explicit descriptions of the manifestations of spiritual awareness during childhood remain (McSherry & Smith, 2007). Therefore, it is plausible some developmental changes are missing from the known body of knowledge on the subject.

Use of an embodied perspective to pursue an understanding of the meaning of the spiritual dimension and moving away from a focus on the distinction between religiosity and spirituality may reveal a clearer picture of how spirituality presents and is expressed in late adolescents. Children acquire culture, religion, and spirituality from their family, cultural surroundings, and prior experiences; all of these play a role in child development (Frank & Kendall, 2001). A focus on what spirituality and/or religiosity means to late adolescents, as well as how that meaning influences their beliefs and practices, including decision-making and behavior, may reveal the processes that make religiosity and/or spirituality a protective factor. Moreover, this type of investigation adds a contextual component to the understanding of adolescent spirituality to inform adolescent health care. Wendell Berry (2002) states:

To divide the body and soul, or body and mind, is to inaugurate an expanding series of divisions – not, however, an infinitely expanding series, because it is

apparently the nature of division sooner or later to destroy what is divided; the principle of durability is unity.” (p. 108)

An understanding of adolescent spirituality depends on knowledge of the meaning spirituality and/or religiosity has for the late adolescent and how that meaning influences their beliefs and practices; this can only occur by viewing the adolescent in their totality. Only then will the answers have durability.

Statement of the Problem

Searching for the definitions of religiosity and spirituality and comparing those definitions using a reductionist, positivist perspective of inquiry have failed to yield knowledge applicable to direct patient care. Speck (2005) states a systematic way to assess and research spirituality and religiosity is needed to find effective interventions. Spirituality is expressed in varying ways depending on the individual and age group (Elkins & Cavendish, 2004). Therefore, investigating spirituality in late adolescence from an embodied perspective to understand both maturation and expression, embedded in context, would address the evidence in current literature linking religiosity and spirituality to adolescent health better than previous methods used. Additionally, cultural, demographic, and socio-economic realities may emerge in the late adolescent's views of spirituality and religiosity in this study because the context of social interaction will remain. Also to be revealed are the embodied nature of perceptions, meanings (definitions), beliefs, and behaviors of late adolescents regarding their spirituality and religiosity.

In the literature, nurses have been reported as the only health care providers with sufficient time to discuss spiritual needs with patients (Pullen, Modrcin-Talbott, West, & Muenchen, 1999). For this reason, it makes sense that nurse researchers take the lead in exploring these concepts in a way ultimately leading to intervention and action. Needed are investigations of these concepts from an emic, embodied perspective rather than an etic, positivistic perspective. Framing future research in an embodied perspective challenges nurse researchers to re-evaluate the epistemic foundations and pragmatic implications of existing research approaches involving the concepts of spirituality and religiosity. Embodiment as a research perspective allows nursing to develop a strong conceptual foundation of knowledge to begin implementation of spiritual and religious care into practice, as mandated by multiple health care organizations and to improve late adolescent health.

Research Questions

The study investigated the influence of spirituality and/or religiosity (including meaning, beliefs, and practices) on behavior during late adolescence through a qualitative, grounded theory design. Broad and general research questions were created (Creswell, 2003) to begin discussion. From these starting interview questions, theoretical concepts emerged. The questions posed were:

1. Where do/did late adolescents learn to identify and use their personal spirituality?
2. What meaning do late adolescents ascribe to their spiritual dimension?
3. How does spiritual maturation influence beliefs and practices during late adolescence?

4. What adjustments have late adolescents made in their behavior as their spiritual dimension matures?
5. What change have late adolescents experienced in their understanding of spirituality and religion as they have matured?

Research Definitions

Three periods divide adolescence: early, middle, and late. A concept analysis, using an evolutionary process, was performed in an attempt to illuminate the current use of these conceptual terms sensitive to context and time (Rodgers, 2000). Late adolescence is defined in the literature as extending between the ages of 16 to 26 years (Brown et al., 2008; Kendler et al.; Schwartz et al.; Selfhout et al., 2009; Wu & Chiou, 2008). For the objectives of this study, late adolescence was limited from 16 years to 21 years of age. Late adolescents, by virtue of their development, are able to perform formal operations that allow them to discuss abstract concepts.

Spirituality, for the purposes of this study, was an individual's understanding of his or her personal relationship with him/herself, the people around them, the community around them, and the larger global world in his or her search for meaning and purpose. Maintaining an objective view of the results of this study permitted change to this initial definition of spirituality as participants revealed their experiences related to development and growth and their answers to questions on spirituality were analyzed. Spirituality may include a formalized religious framework or be linked to a greater good or Higher Power.

Religiosity, for the purposes of the study, is an ascription to a formalized ideology originating in a religious organization, a worldview, philosophy, or theology linked to a

belief in a greater good or Higher Power expressed by ritualized behaviors. An open definition permitted expression of religiosity from various perspectives as the study population was global in nature. The researcher had a desire to resist placing a Judeo-Christian perspective on religiosity as the normative standard in order to include all possible cultures and beliefs in the study.

Assumptions

The following assumptions were integral to the study:

1. Spirituality is a universal human dimension inherent in every individual of every age, including late adolescents. Although inherent to every individual, the spiritual dimension may be embraced or denied along a spectrum influencing each individual's awareness of this dimension.
2. The late adolescent is able to describe his/her action(s) in a given setting and the process(es) involved in choosing those actions.
3. The researcher is able to capture accurately the data provided by adolescent participants in the study in sufficient detail to allow for constant comparison between data sources while maintaining sensitivity and limiting bias to the data during the research process.
4. Grounded theory is an appropriate method to understand key concepts related to spirituality, as well as their relationships, to create theoretical meaning of the processes described by late adolescents in their discovery of spirituality within the maturation process.

Conceptual Lens

Theoretical frameworks in qualitative research are not as clear as in quantitative research; theoretical frameworks can be helpful in qualitative research to assist in determining the methodology to be used (Corbin & Strauss, 2008). A grounded theory research design proposes the discovery of theory grounded in the research data. Therefore, the use of a pre-existing theoretical framework would be inappropriate. Instead, a conceptual lens frames the way the data is used. Symbolic interactionism is the epistemology of grounded theory and supports the investigation of spirituality within the maturation process of late adolescence.

Herbert Blumer (1969) was the first person to use the term symbolic interactionism. Symbolic interactionism refers to a particular approach to studying “human group life and human conduct” (p. 1) and is based on three basic points or premises, including: (a) “... human beings act toward things on the basis of the meanings that the things have for them,” (b) “... the meaning of such things is derived from, or arises out of, the social interaction that one has with one’s fellows,” and (c) “... these meanings are handled in, and modified through, an interpretive process used by the person in dealing with the things he encounters” (p. 2). A human being doesn’t interact with other people, groups, or society via a stimulus and response interaction; instead a person interacts with others by interpreting a situation, creating personal meaning in regards to the situation, and constructing a response (Blumer, 1969, 2004; Mead, 1934/1962).

Symbolic interactionism notes that the meanings of things, objects, or people are developed from interactions between humans; when humans interact, meaning is discovered and becomes real (Blumer, 1969). Neither participant in the interaction creates the meaning independently, but the meaning is formed between them within the context of the interaction (Blumer). An individual within symbolic interactionism has an ability to have a relationship with the self to view, order, and analyze his/her individual behavior. This self engages with others to create meaning from what is encountered.

Humans do not exist in a cause-and-effect relationship with the larger world; instead there is interplay between the actions of the individual, internally and externally, and the environment, including other people. The meanings individuals hold for things influences their responses; therefore, reducing a behavior to a cause-and-effect relationship is to nullify the personal relationship with the self (Blumer, 1969). Furthermore, the way people ascribe meaning to things is through the process of social interaction; the value or meaning of things is conveyed by interactions with others – the community, society, and so on (Mead, 1934/1962). In this sense, time is a valid constraint on the meanings applied to things in addition to the people in the community of context. Consequently, meaning is a product of the interaction between people and is modified as the people and time change.

This perspective has value when an emic view is used to define spirituality in late adolescence during the maturation process. As adolescents grow and develop, their interaction with the larger community and world becomes greater. Late adolescents' abilities to process abstract thoughts and direct personal choices increase as they grow.

All concepts, including spirituality and religiosity, are social products formed and transformed by processes related to social interaction (Blumer, 1969). Describing George Herbert Mead's ideas on human interaction, Blumer articulately states,

Human beings are seen as living in a world of meaningful objects – not in an environment of stimuli or self-constituted entities. This world is socially produced in that the meanings are fabricated through the process of social interaction. Thus, different groups come to develop different worlds – and these worlds change as the objects that compose them change in meaning. (p. 69)

Consequently, as a child grows into adolescence and an adolescent grows into adulthood, the individual increases interactions with the surrounding environment, the ability of the late adolescent to influence, inform, react, and participate in his or her own perception of him/herself and in his or her social group, including his or her future, also changes and increases. Symbolic interactionism describes the heart of this ability in all senses, from the private, internal view of the self to the ability to change meaning from a local to a global view. For this reason, symbolic interactionism was the conceptual lens in which to engage grounded theory research for this project.

A grounded theory research design, stemming from symbolic interactionism, can illuminate the meaning spirituality and/or religiosity has for late adolescents within the maturation process. Grounded theory design is a valuable perspective to understand how people present and construct their identity and how they define themselves in situations with others. This is particularly relevant to late adolescents, a group not yet fully mature in all aspects attributed to adults. Therefore, the epistemological foundation of symbolic

interactionism within grounded theory is appropriate to discover the meaning of spirituality in late adolescence during the maturation process. Knowledge regarding the meaning of spirituality and/or religiosity for late adolescents will also elucidate information on the beliefs, practices, and behaviors of late adolescents.

Summary

The purpose of this qualitative, grounded theory study was to develop a theoretical model that describes the influence of spirituality and/or religiosity (including meaning, beliefs, and practices) on the behavior of individuals during late adolescence. During this exploration of the developmental stage of late adolescents, aspects of spirituality were examined for change due to maturation. This chapter presented an epistemological argument to change the research focus from a reductionist, holistic perspective to an embodied, emic perspective in order to discover the influence of spirituality and/or religiosity on health in late adolescents. Definitions were provided for the study concepts. Assumptions underlying the study were presented, and a brief overview of symbolic interactionism, the conceptual lens underpinning the investigation, was discussed.

The remainder of this study is organized into five chapters, including a bibliography and appendixes following. Chapter II addresses a review of literature. Three main sections divide the literature review. The first is an appraisal of the formal directives to include spirituality as part of health and educational environments. Also included is a review of literature on the concepts of spirituality and religiosity. The second section examines the literature on adolescent maturation. In this section,

developmental periods, theories of spiritual development, etic and emic perspectives of spirituality, and literature on spiritual learning behaviors are evaluated. In addition, literature on the secular family is included. The third section reviews current internet use by adolescent populations. Also presented is literature on electronic interviewing in qualitative research and, specifically, email interviewing. Identification of gaps in the literature close the chapter.

Chapter III describes the research design and methodology of the study; the sampling techniques, interview techniques, and method procedures are described. Data analysis is presented in Chapter IV. Chapter V presents the theoretical model. Finally, Chapter VI contains the study summary, conclusions, and future recommendations. The bibliography and appendixes conclude the paper.

CHAPTER II

REVIEW OF LITERATURE

The purpose of this study was to use a qualitative, grounded theory research design to develop a theoretical model that describes the influence of spirituality (including meaning, beliefs, and practices) on late adolescent behavior. The maturation process of each individual is unique, but follows a similar trajectory. A review of the current viewpoint regarding this trajectory of late adolescent maturation allowed the researcher to gain understanding in adolescent behavior without the dimension of spirituality.

Similarly, difficulties in distinguishing between the terms religiosity and spirituality continue to confound discussions relating the terms to specific research or disciplines. Definitions of these concepts continue to evade sufficient validity to cross disciplinary boundaries (Rubin et al., 2009). According to many sources, there is a strong connection between spirituality and/or religiosity and psychological functioning and/or behaviors of adolescents. There is also no firm agreement on what spirituality is, and this has raised questions about the accuracy of many assertions in the literature (MacDonald & Holland, 2003).

Furthermore, contemporary adolescent populations have an affinity for text based communication (Covey, 2009) and use of the internet. The consistently increasing use of

electronic media for information and communication among adolescent populations bring forward questions about adapting traditional ways of interacting with adolescents, which includes research investigations.

In this chapter, the literature review has been divided into three sections. The first section focuses on spiritual care within health and educational environments. Mandates, codes of conduct, global initiatives, and calls for reform are reviewed. Also included in this section is a review of the definitions of spirituality and religiosity in the literature and information on how those definitions overlap.

The second section of the literature review addresses adolescents as a population, and research related to their maturation. This part includes the sub-topics of the developmental period; theories of spiritual development; etic and emic perspectives on health behaviors during this period, as well as the dissonance between these two perspectives; and literature regarding how spiritual development is learned. Also discussed is research regarding adolescents living in secular families.

The third section of the literature review examines methodological issues with adolescents and methodological issues with technology. Regarding methodological issues with adolescents, the topics discussed includes adolescent use of the internet and adolescent web-based resources. Related to technology, literature about the use of electronic interviewing as part of qualitative methods in nursing research and specific information on email interviewing are reviewed.

Finally, gaps in the literature and the need for the current investigation are presented.

Spiritual Care Within Health and Educational Environments

Organizational Mandates

It is important to note that multiple institutions and organizations have mandated or created guidelines to bring focus on spirituality as an innate human dimension. As stated in Chapter I, the American Association of Colleges of Nursing (2002), North American Nursing Diagnosis Association (2001), the American Holistic Nurses Association (2007), and the Joint Accreditation of Healthcare Organizations (Cavendish et al., 2004) all express the importance and need to address the spiritual dimension within the health care setting. Outside of the United States, the World Health Organization (2006), the International Council of Nurses (2006), the United Kingdom's National Institute for Clinical Excellence (2004), the United Kingdom's National Health Service (2003), and Scotland's Department of Health (Scottish Executive Health Department, 2002) have all addressed the need to provide culturally sensitive spiritual care.

Interestingly, nursing officers, stressing a need to find the best practices for accommodating various multi-cultural and spiritually diverse societies, wrote the foreword to the United Kingdom's guide on meeting religious and spiritual needs of patients and staff. Nurses also wrote Scottish guidelines on chaplaincy and spiritual care within the National Health Service in Scotland.

Additionally, outside the health care profession, Lifelong Learning UK, an independent employer-led council responsible for professional development in Ireland, England, Scotland, and Wales, now includes a standard addressing spirituality within the list of Professional and National Occupational Standards for Youth Work. Specifically,

standard 1.1.4 states, “Encourage the spiritual development of young people” (Lifelong Learning UK, 2008) and lists specific outcomes, behaviors, knowledge, and understanding needed to meet this standard.

The World Health Organization (WHO) developed a standardized, scientific Global School-Based Student Health Survey (GSHS) in collaboration with the U.S. Centers for Disease Control and Prevention (CDC) and other world organizations. The survey was developed to measure and assess risk and protective factors of 13-15 year old adolescents as a means to develop priorities, establish programs, and advocate for resources. Of the 210 questions in the core-expanded GSHS, only one question addresses religion or spirituality. According to the WHO (2006), this occurred despite the outcomes from a meeting of the WHO Regional Advisory Panel on Impacts of Drug Abuse, which met to discuss the research evidence supporting the importance of religion and spirituality in matters of health and disease. Furthermore, during the meeting, it was recommended that the WHO definition of health, “should include ‘spiritual well-being’ in addition to physical, mental and social well-being” (p. 2).

These examples show the strong view linking spirituality and religiosity as a positive influence on health while also showing a lack of understanding why this relationship exists. Ironically, the obligation to include religiosity and spirituality into the health field and youth development has been recognized, but it lacks true application.

Spirituality and Religiosity – A Review

In this section, definitions of spirituality and religiosity are reviewed. The researcher perused the literature for knowledge on what these two terms meant at the time

of this research. The aim was not to clarify or redefine what had been already understood, but to review the current understanding of “the times” and in so doing, provide the reader with a foundation or background in current thought pertaining to two conceptual definitions in this study.

Clarke (2009) emphasized how definitions can be constructed to avoid serious consideration of a concept either through oversimplification, which avoids capturing certain aspects of a concept, or too broadly, which allows capture of almost anything. Furthermore, it may be an error to assume definitions are needed for understanding a concept. McSherry (2006) and Pehler (1997) take a counter perspective and assert the importance of definitions is to provide a descriptive and tangible way of viewing a phenomenon. The variability in definitions of concepts in this study is due to the range of professionals investigating the phenomenon, including nurses, chaplains, physicians, social workers, and occupational therapists.

Spirituality

Outside of theology, the term spirituality was not used within the larger population until the 1950s (Clarke, 2009); within theology, the term was used as a way to describe the beliefs embedded in religion (Josephson & Dell, 2004). Today, spirituality has been linked to a sense of meaning, purpose, and morality that individuals use to guide their lives (Josephson & Dell; Krieger-Blake, 2006; McEvoy, 2003; Rex Smith, 2009; Shek et al., 2006; Tan, 2005). Additionally, spirituality has been further explained to be the inner life children and adolescents use to construct core meaning to their existence (Garbarino & Bedard, 1996). Spirituality has been identified as an important and

necessary component of pediatric assessment, both for ill and well children (Barnes, Plotnikoff, Fox, & Pendleton, 2000; Fosarelli, 2003; McEvoy, 2000; Pfund, 2000).

Green (2008) recognized the inherent difficulty in finding valid ways to measure spirituality. Historically, this attribute has been measured by observing behaviors and knowledge. Most people would describe spirituality as being special or sacred and define spirituality as a smaller category (or sub-category) of culture; therefore, an assessment of spirituality must stem from the larger perspective of culture (Doka, 1994; Labun, 1988; McEvoy, 2003; Wahl, Cotton, & Harrison-Monroe, 2008). In addition, some authors have suggested customizing health interventions for adolescents based on demographics such as youth risks or ethnic minorities (Burris, Brechting, Salsman, & Carlson, 2009). Considering this, assessment of pediatric spirituality cannot be separated from an assessment of the family and the greater community.

Another viewpoint is that a ceiling effect may be applied to the concept of spirituality since spirituality is a personally defined characteristic and may be evaluated by measures of well-being rather than self-perceived spirituality (Lorenz et al., 2005; McSherry, 2006). Spirituality may be experienced through mediators, such as sufficient shelter, peace within a situation, care of others or from others, etc. Therefore, there may be an action-based component related to a spiritual experience.

Spirituality has been defined as: (a) connecting with others, that includes other people and/or a higher being; (b) establishing personal beliefs and values; and (c) a search for answers to the meaning of life (Lau, 2006). The problem with studying spirituality as a research variable is its similarity to the concept of religion (Benson &

Roehlkepartain, 2008; Dew et al., 2008; Emmett, 2008; Green, 2008; Peterson, 2008; Pittman, Garza, Yohalam, & Artman, 2008). Furthermore, in children, spirituality and religion are not necessarily distinguishable from one another. Add to that the dimension of time, and spirituality becomes even more complex because a child's expression of spiritual beliefs can change as their cognitive development becomes more advanced (Houskamp et al., 2004).

Problems with defining spirituality stem from a multiple issues related to unknown factors. Cotton et al. (2006) stated, "... despite the fact that terminology and constructs varied widely, investigators often used single-item measures or non-validated multi-item measures for the purpose of the study" (p. 476). These types of investigations limit what is expressed by study participants. Spirituality extends beyond ideas and actions, to include emotions, identity, values, significance in relationships, and personal aspirations (Benson & Roehlkepartain, 2008; Green, 2008). This description highlights the embodied nature of the construct and the resistance to reductionism.

Religiosity

The importance of spirituality and religiosity in adolescents has been shown through various surveys. In one U. S. survey, 87% of adolescents were affiliated with a religious group or tradition, 85-95% were aware of religion being important in their life, more than 45% reported attending religious services at least monthly, and 40% reported frequently praying alone (Gallup & Bezilla, 1992; Smith & Denton, 2009; Smith, Denton, & Faris, 2002). Interestingly, some studies noted adolescents describing themselves as non-religious yet attending church and church youth groups (Smith et al., 2002)

The term religiosity is sometimes used to refer to a system of standardized practices, ideas, beliefs, and/or experiences related to spirituality (Dell, 2004; Josephson & Dell, 2004; Tan, 2005). Religiosity may be described as a smaller category under the umbrella of spirituality (Hodge, 2000; Labun, 1988; McEvoy, 2003). Addressing religion within pediatric care has been historically limited to end-of-life issues (Barnes et al., 2000).

Overlap of Definitions - Spirituality and Religiosity

Many assert there is a distinction and difference between spirituality and religiosity. Laukhuf and Werner (1998) identify spirituality as being a manifestation of the spirit, which is very personal and individual. They elaborate on this and say spirituality consists of a value system and/or a personal quest each individual journeys on through life to find meaning and purpose, sometimes including finding a relationship with a greater power (God) and the rest of the universe.

According to Laukhuf and Werner (1998), religion is a man made framework used to define a system of values and codes of conduct which encompass rituals as a means to answer questions about what it is to be human in relation to self, others, and a Higher Power; in essence, a moral code. Others have viewed spirituality and religiosity as synonyms and use the terms interchangeably to describe social integration or social institution, a dimension of personality development that spans religiosity, spirituality, and a transcendent component (Ortiz, Villereal, & Engel, 2000).

By using a holistic model, nursing has had a history of treating spirituality as a separate component of a person; this objectification of the concept has placed it alone,

separate from its surroundings, in an attempt to describe it (Clarke, 2009). The separation of spirituality from religion has been described as the result of a fearfulness to discuss religion with patients (Hollins, 2005). Theology and religious scholarship view spirituality within its embodied environment. Placing emphasis on limiting and defining the concept instead of looking for practical ways to employ it in practice has made spiritual care indistinguishable from psychosocial care (Clarke, 2009).

A final point on spirituality and religiosity concerns the numerous instruments measuring these concepts that have been developed for adults; few have been used to evaluate children and adolescents, and very few have been validated (Houskamp et al., 2004; Sexson, 2004). MacDonald and Holland (2003) interviewed 266 undergraduate psychology students in an attempt to validate the Minnesota Multiphasic Personality Inventory, revised (MMPI-2) by investigating the relationship between spirituality and the MMPI-2 Clinical scales. MacDonald and Holland employed two different measures of spirituality, the first being self-reported religious involvement, such as church attendance. The second measure of spirituality was more difficult to define and involved several components of spirituality as measured by the Expressions of Spirituality Inventory (ESI) tool. The ESI is a "... self-report instrument designed to assess a five-dimensional, descriptive measurement model that was specifically devised to serve as a structural framework for organizing scientific definitions of spirituality" (p. 401). The five dimensions of spirituality in this model include cognitive orientation towards spirituality, an experiential/phenomenological dimension, existential well-being, paranormal beliefs, and religiousness. Results of their study revealed the MMPI-2

Clinical scales are related to spirituality. "... MMPI-2 Clinical scale scores were found to significantly differ as a function of religious involvement and to generate moderate associations to spirituality as measured by the ESI" (p. 407). Although results of their research were similar to past research findings, the authors expressed caution in interpreting the relationship between spirituality and the MMPI-2 as a simple causal relationship because the mediating mechanisms causing the relationship were unknown.

Until relationships between spirituality and assessment tools are more clearly understood, research results remain weak. Exacerbating this knowledge is the hypothesis that children do not clearly distinguish between formalized religion and spirituality due to developmental issues (Hill & Pargament, 2003; Pehler, 1997).

Late Adolescence

Adolescent spirituality has been based mainly on the adult understanding of spirituality, or it has been correlated to child development. The lingering problem or unknown is how adolescents organize the concepts related to spirituality. How do they describe them? It is also likely that some adolescent developmental changes have not been captured (Cotton et al., 2006; Dew et al., 2008; Wilson & Nicholson, 2008).

Late Adolescence as a Developmental Period

Adolescence can be divided into three periods: early, middle, and late. The researcher performed a concept analysis using an evolutionary view (Rodgers, 2000) in an attempt to illuminate the current use of these conceptual terms sensitive to context and time. Concept analysis revealed that early adolescence has been defined in the literature as occurring between the ages of 11 and 16 years (Kendler et al., 2008; Roche, Ahmed, &

Blum, 2008; Schwartz et al., 2008; Selfhout et al., 2009); middle adolescence occurs between 13 to 17 years of age (Roche et al.; Schwartz et al.); and late adolescence occurs between the ages of 16 to 26 years (Brown et al., 2008; Kendler et al.; Schwartz et al.; Selfhout et al.; Wu & Chiou, 2008). Note how society, at the time of this research, extends or overlaps the definition of late adolescence into an early adult age group.

Adolescence is a distinct developmental stage separate from childhood and adulthood that has unique challenges different from other developmental stages. The biological and psychological needs of adolescents, along with specific developmental changes during the second decade of life, make them vulnerable to high-risk behaviors (Dirck & Bekkum, 1995; Irwin, Burg, & Cart, 2002; Pasch, Nelson, Lytle, Moe, & Perry, 2008; Sanci, Kang, & Ferguson, 2005). High rates of adolescent injury, violence, homicide, suicide, mental health disorders, substance use, sexually transmitted diseases, and pregnancy have incited a need for action on the part of health care providers (Irwin et al., 2002; Newacheck, Hung, Park, Brindis, & Irwin, 2003; Ziv, Boulet, & Slap, 1999). Ironically, at the time of this report, adolescent mortality and morbidity trends were worsening, and the health status of adolescents was worse than their parents at a similar age (Sanci et al., 2005).

Adolescence is a time of increased capacity to reason and problem solve, to project and anticipate repercussions, and to finalize and form the self in preparation for adulthood. These activities include taking responsibility for self actions and taking a place in the larger society that extends from friends and family to communities, countries, the world, and a universal association, if the adolescent has beliefs in such things. The

late adolescent, by virtue of his/her cognitive and psychosocial development, is searching for truth. The late adolescent is forming an identity and seeking independence. Erikson (1963) defined this developmental task of adolescence as identity versus role confusion. Late adolescents utilize group norms to define differences between themselves and their parents. Verification of late adolescent conformity to their peer group and nonconformity to the adult group provide the late adolescent with a frame of reference in which they can exhibit their own self-assertion while they reject their identification with their parents' generation (Hockenberry & Wilson, 2006).

The cognitive process of formal operations occurs in most adolescents by age 14 (Hockenberry & Wilson, 2006). Formal operations allow adolescents to think in abstract terms, to think about possibilities, and to think through hypotheses. The adolescent's search for a personal self is possible through this acquired cognitive ability. Formal operations in late adolescence allow the late adolescent the ability to construct a personal past and to anticipate a personal future (Fowler, 1981). Therefore, the late adolescent begins to exhibit a personality which is disciplining and conscious of shaping one's life in accordance with self-discerned patterns and aspirations (Fowler, 1981). With the ability for abstract thinking and the use of deductive reasoning, the late adolescent is concerned about gaining a clear understanding of life and its purpose.

The personal sense of self involves emotion and influences an adolescent's security with him/herself and his or her relationships with others through the meaning they ascribe to their self. Growth and development is impacted by the individual's perceptions and emotions as well as by his or her body image as it is reflected back to

them through interactions with others (Alligood, Evans, & Wilt, 1995). In this sense, when studying an individual, it is imperative to consider and acknowledge the influence of all these unique variables (emotions, perceptions, self-image), which extend to and influence the social interactions and processes of the individual. Extracting only one aspect of an interaction while ignoring others can lead to incomplete data as all areas need to be evaluated to see each concept completely; the embodiment of a person cannot be reduced to parts without loss of clarity in understanding the complexity and interrelatedness of the system.

The development of spirituality in childhood and adolescence has been described as following cognitive, emotional, and psycho-motor development (Fowler & Dell, 2004; Steen & Anderson, 1995). Buck (2006) asserts spirituality transcends beyond cognitive ability, but does not articulate how this occurs. Variance of spiritual expression by age is acknowledged in the literature (Fowler & Dell, 2004; Koenig & Cohen, 2006; Quinn, 2008), and it can be noted that developmental acquisitions and tasks have reached a level in the late adolescent where the adolescent has an ability to discuss activities and behaviors for meanings and feelings.

Quinn (2008) varies slightly from other authors in trying to place spiritual development within adolescent development. She proposes several possible placings: spiritual development as a separate domain of human development, spiritual development as a part of moral development, or spiritual development as a cohesive force working across other domains of adolescent development, helping to bind them together. Regardless, Quinn purports spirituality is important to adolescent development.

Similarly, Peterson (2008) contests the implied assumption that spiritual development is integrally linked to other developmental tasks and contends that spiritual development may start, stop, or pause for periods during the lifetime. Furthermore, Peterson proposes adults may choose to stop developing spiritually at any time or choose to not develop spiritually at all as a direct choice.

Due to a lack of explicit description on how spiritual awareness manifests itself during childhood, Smith and McSherry (2004) engaged in a concept analysis of spirituality and child development. The conclusion of their concept analysis was the need for better understanding of spirituality, and the need for tools to be developed to facilitate assessment. The lack of reliable and valid self-report measures assessing spirituality and religious experience of children and adolescents highlights a failure on the part of researchers to understand these phenomena across the developmental spectrum (Houskamp et al., 2004). The expression of spirituality differs depending upon the age of an individual, and its expression is unique in every person (Koenig & Cohen, 2006). Likewise, failure to capture a concrete workable definition of the phenomenon may be due to shortcomings in adults collecting data or in the labeling of behaviors assessed (Pittman et al., 2008). Therefore, use of qualitative research measures may help identify or define characteristics of spirituality at each developmental level; also possible with qualitative research is the ability to capture expression beyond verbal communication to understand feelings and beliefs of children at different stages of development (Houskamp et al., 2004). Imperative is the need to be sure the research approach is not hinged on the

researcher's idea of what spirituality is, but allows the subjects to openly conceptualize the phenomenon from their own ideas (Greenwald & Harder, 2003).

Spirituality as a Developmental Process

Fowler and Dell (2004) described faith development as: (a) giving coherence and direction to one's life, (b) linking people in shared trusts and loyalties with others, (c) grounding personal stances and communal loyalties with others to a larger frame of reference, and (d) enabling people to face and deal with the challenges of human life and death which ultimately affect the quality of their lives. Fowler and Dell believe faith formation develops along the lines of psycho-social and cognitive development as described by Erikson and Piaget.

In the book, *Stages of Faith*, Fowler (1981) discussed how adolescents redefine their thinking during adolescence from their images of childhood. Specifically, the adolescent, immersed in self-consciousness and egocentrism, seeks significant others as a mirror in which to evaluate the self (Fowler, 1981). Because the adolescent sees the self through the significant other's eyes, by virtue of formal operations and abstract thought, the adolescent will give the significant other a complex personality able to reflect back the adolescent's projected image. In this capacity, the adolescent is able to see God as being all things and able to know the adolescent personally. According to Fowler (1981):

Much of the extensive literature about adolescent conversion can be illumined, I believe, by the recognition that the adolescent's religious hunger is for a God who knows, accepts, and confirms the self deeply, and who serves as an infinite guarantor of the self with its forming myth of personal identity and faith. (p. 153)

Fowler clarified the identity crisis of adolescence as being derived from the discrepancies and dissonance between images of an adolescent's perceived self and images reflected by significant others. The significant others who mirror an adolescent have the power to contribute positively or negatively to an adolescent's development. When God is one of those significant others, the correlated self-image can exert a powerful ordering of the adolescent's identity and values (Fowler, 1981).

Although this developmental perspective on spiritual development is widely cited as reasonable and valid, there are those who identify limitations or disagree with this perspective. It has been noted that Fowler's stages are relevant to a Western cultural perspective, specifically, Christian faith traditions (Fosarelli, 2003). A lack of inclusiveness for other faith traditions is a limitation in generalizability.

Doka (1994) stated a critical view of Piagetian models of child spirituality because Piagetian models view development in terms of limited functional capacity until the child reaches the developmental level of understanding abstract thought. From this perspective, Doka described the importance of understanding a child's spirituality from his or her expression of the characteristic at his or her developmental level rather than identifying it as a limited expression due to boundaries in developmental capacity. The child, embodied at that moment, is complete and is expressing his or her spirituality as it should be expressed, not more or less than what is naturally possible and inclusive for that child.

Adults may dismiss the spiritual insights of children and adolescents because they do not use adult language to describe their thoughts (Sexson, 2004). Suggestions to

better understand pediatric ideas of spirituality include endorsing different techniques for understanding such as listening to informal narratives, observing, drawing, or music (Pfund, 2000). The option of an alternative format avoids the need for pediatric populations to conform to the adult preference of oral communication in order to convey information.

Etic and Emic Perspectives

Late adolescence, as a developmental period, has changed with time. A discussion of the views of spirituality and religiosity from an etic and emic perspective related to the current information in the literature is presented.

Understanding Adolescent Spirituality From an Outside Perspective (Etic)

Studies have identified differences between adolescent male spirituality and adolescent female spirituality during states of depression (Desrosiers & Miller, 2007) and substance use (Steinman & Zimmerman, 2004), but did not acknowledge why or how this occurred. Personal crisis is frequently cited as leading adolescents to access their spirituality; therefore, it is imperative to understand the adolescents' worldviews, including a wide array of religious and cultural backgrounds, in order to understand this association (Wahl et al., 2008).

Adolescent spirituality has been increasingly identified as an attribute that decreases health-risk behaviors and increases a healthy lifestyle (Fehring et al., 1987; Hussong, 2000; Newman, Newman, Griffen, O'Connor, & Spas, 2007; Rew & Wong, 2006; Ritt-Olson et al., 2004; Sexson, 2004; Stewart, 2001; Tartaro et al., 2005; Turner-Musa & Lipscomb, 2007). Recent data relates the influence of spirituality with substance

use (Benjet et al., 2007; Ritt-Olson et al., 2004; Stewart, 2001), voluntary sexual activity (Bergman et al., 2008; Childs, Moneyham, & Felton, 2008; Holder et al., 2000; Hurd & Zimmerman, 2010), and adolescent initiative and responsibility for self-care (Callaghan, 2005).

Health-risk behaviors. Frequently, adolescent spirituality has been associated with lowering health-risk behaviors. In a systematic review of research focused on associations among religiosity/spirituality and adolescent health attitudes and behaviors, Rew and Wong (2006) noted the most commonly used health behavior measures were alcohol use, sexual activity, and use of generic drugs or drugs other than marijuana. Every study reviewed by Rew and Wong examined the associations between religion/spirituality and health-risk behaviors, while few studies explored the relationship between religion/spirituality and health promoting behaviors. Tangentially, Hodge, Cardenas, and Montoya (2001) investigated the relationship between spirituality, religious participation, and substance use in a cross-sectional design. Their results found levels of spirituality were inversely associated with the likelihood of using marijuana or hard drugs. In another study, using data from the National Longitudinal Study of Adolescent Health to investigate public and private domains of religiosity and adolescent health risk behaviors, Nonnemaker, McNeely, and Blum (2003) found both public and private religiosity were protective against cigarettes, alcohol, and marijuana use. Furthermore, they suggested more research to explore the causal mechanisms that make religiosity protective for adolescents. Similarly, in a cross-sectional study, Turner-Musa and Lipscomb (2007) evaluated spirituality and social support as protective factors

against health-compromising behaviors, such as smoking, alcohol use, drug use, and risky sexual behavior among African American college students. The results of their multivariate analyses revealed students with low levels of spirituality were more likely to smoke and were more likely to use alcohol; however, no significant findings emerged for drug risk or risky sexual behaviors.

Researching the association between certain elements of spirituality and voluntary sexual activity, using a cross-sectional design, Holder et al. (2000) found higher levels of spirituality and interconnectedness with friends were inversely associated with rates of sexual activity. A study conducted by Childs, Moneyham, and Felton (2008) examining sexual abstinence and sexual activity among low-income African American adolescent females had similar results to Holder et al.; they found spirituality significantly related to attitudes towards abstinence. Contrary to Holder et al., Childs and colleagues found spirituality was not significantly related to sexual activity as was previously shown in the literature, as spirituality was a protective factor against initiating sexual activity. Conflicting data implied the need to examine more fully the relationship between spirituality and sexual behavior. Interestingly, in a literature review on the relationship between religion and spirituality and adolescent psychiatric symptoms, Dew and colleagues (2008) examined 115 articles and noted ninety-two percent found a significant relationship between religiousness and improved mental health.

Evaluating the relationship between spiritual values, religious attendance, and suicidal behavior, Rasic and colleagues (2008) used a nationally representative sample to determine results. Results revealed attendance of religious activities was associated with

decreased suicide attempts in the general population and in those with mental illness independent of social supports. This study is important because it begins to examine the mechanisms that may explain the relationship between spirituality and/or religiosity and the behaviors seen within the study community.

Investigating the relationship between religiosity, social support, depressive symptoms, and suicide risk in African American college students versus their “White” counterparts, Walker and Bishop (2005) divided religiosity into intrinsic orientation (e.g. spirituality) and extrinsic orientation (e.g. church attendance or prayer). The research tools included the Beck Suicide Scale, the Beck Depression Inventory, the Religious Orientation Scale – Revised, and the Social Support Questionnaire. The outcomes of the study revealed higher internalized, intrinsic religiosity related to less depression and suicidal thoughts. Additionally, intrinsic religiosity was a more profound variable than extrinsic religiosity and social support, thus contradicting previous research reducing extrinsic religiosity to social advantages that can be explained by social support. Finally, the researchers found no difference between African American college students and Caucasian college students in their results. Surprisingly, an absence of national surveys on the mental health trends for adolescents exists, but epidemiological surveys have found that approximately 20% of adolescents use mental health services (Irwin et al., 2002).

Other studies have identified many adolescents with undiagnosed mental health disorders. In a study of 1,710 adolescents, Roberts, Lewinsohn, and Seeley (1995) found almost one third had at least one symptom of major depression, yet only approximately

3% had received a diagnosis from a physician. Limited data are available on adolescent mental health issues. This could be a result of several problems plaguing the process of diagnosing child and adolescent disorders, including child access to services, confidentiality, and identification (Roberts, Attkinsson, & Rosenblatt, 1998). Josephson, Peters, and Dell (2007) discussed the need for physicians to dialogue with adolescents and families about sexual behavior and family relationships to better understand adolescent depressive symptoms and bolster spirituality as an inherent internal resource.

Health-promotion behaviors. In a review of religion/spirituality and adolescent outcomes, Cotton et al. (2006) found great promise researching the role of religion/spirituality on the health and well-being of adolescents; they noted most studies used quantitative methods exclusively and therefore left out valuable information regarding adolescent spirituality. They suggested using qualitative designs to complement and inform the quantitative, psychometric measures specifically designed to measure adolescent spirituality. Cotton et al. also noted the need to examine mediating pathways of influence on adolescents to determine ways in which religion and spirituality influence teen health. In a comparison study of chronically ill adolescents with inflammatory bowel syndrome and their healthy peers, Cotton and colleagues (2009) investigated how each group described spiritual well-being and the association of spiritual well-being to mental health outcomes to see if there was a moderating effect, and to determine if existential or religious well-being affected mental health differently than a lack of religious belief. Through descriptive statistics and multiple linear regression, the researchers found all the adolescents reported high levels of spirituality in

their lives both in regard to believing in a loving and caring Higher Power and the sense that the Higher Power contributed to their well being. Interestingly, the researchers also noted that between the two groups, the levels of existential and religious well-being were similar. A possible explanation, posited by the researchers, was the failure to capture the complete experience of chronic illness from the adolescents with the measures of the study. Similarly, Yi and colleagues (2009) performed bivariate and multivariate analyses for differences in and predictors of health value/utility scores in healthy adolescents and adolescents with inflammatory bowel disease (IBD). Their results showed emotional and spiritual well-being were significant to adolescents, both healthy and with IBD, therefore, the conclusion was made that addressing the spiritual and emotional needs of patients may be just as important as addressing their physical needs.

Yet, caution was expressed by Burris, Brechting, Salsman, and Carlson (2009) in their study investigating the factors associated with university students' psychological health, which included spirituality and religiosity. They explained that although their results are open to the interpretation that students use their spirituality to cope in times of distress, the link is weak because it could be expected that religiousness is documented as a coping mechanism (Burris et al., 2009).

In another investigation, Ritt-Olson et al. (2004) studied the influence of spirituality and "Health-As-A-Value" on rates of substance use among adolescents varying in risk. This study revealed spirituality was associated with lower rates of substance use. McCree et al. (2003) examined the relationship between religiosity and African-American females' sexual behaviors, attitudes towards sex, and ability to

negotiate safer sex. Their results showed adolescents who have higher religiosity scores were significantly more likely to have higher self-efficacy in communicating about sex with new and steady male partners, have a later age of sexual initiation, and positive attitudes towards the use of condoms.

In a study to better understand the perceived importance of spirituality, religion, and personal beliefs (SRPB) on quality of life, O'Connell and Skevington (2005) identified 18 facets of SRPB, not related to any one religion (such as "inner peace"). They realized a need existed for the development of accurate measures or evidence on the impact of SRPB on health, overall well-being, illness, and rehabilitation. Using a nationally representative sample, the researchers found a good degree of variability in the importance participants attached to some concepts. Facets of SRPB consensually agreed upon included: hope and optimism, kindness to others, spiritual strength, inner peace, experiences of awe, forgiveness, and ideas related to death and dying. Other facets recognized with only limited agreement among participants included: meaning and purpose in life, connection to a spiritual being or force, wholeness and integration, and a code to live by. Facets that varied greatly among participants included most ideas related to formalized religion such as attachment and detachment, freedom to practice beliefs and rituals, and specific religious beliefs. Based on data generated from their study, the researchers purport that spirituality, religion, and personal beliefs are important and relevant to quality of life and therefore should be included in complete holistic assessment of patient health in generic measures, such as the World Health Organization's Quality of Life Assessment (WHOQOL) tool.

In a comprehensive review of literature, Wong, Rew, and Slaikeu (2006) found 90% of studies showed higher levels of religiosity and/or spirituality were associated with better adolescent mental health outcomes. A variety of measures were used in studies covered in Wong et al.'s review, including, in descending order of frequency: institutional measures, personal devotion, ideological measures, multidimensional measures, existential measures, and generic measures. The authors noted a variance in the number of measures (one to three or more) used within each study, and a lack of explanation regarding either reliability or validity for the measures used. From results of the studies reviewed, the authors believed stronger impacts of institutional measures of religiosity and/or spirituality on adolescents, more than adults, were due to the developmental changes occurring during adolescence and the adolescent's need to have a sense of belonging and order. Recommendations for further research suggested evaluating diverse populations and non-U.S. samples as well as using measures with demonstrated reliability and validity to understand the mechanisms linking adolescent religiosity and/or spirituality with mental health.

A counterpoint is represented that religious practices, as well as spirituality, may have negative consequences on pediatric populations, such as inciting excessive guilt, religious based prejudice, or excessive corporal punishment (Burriss et al., 2009; Sexson, 2004). A study investigating the rate of depression among adolescents who felt abandoned by God or the religious community was undertaken by Dew and colleagues (2009). The investigation used outpatient psychiatric adolescent self-reports employing the Beck Depression Inventory-II scale, the Brief Multidimensional Measure of

Religiousness/Spirituality scale, the Multidimensional Scale of Perceived Social Support, and the Problem Oriented Screening Instrument for Teenagers-Substance Abuse Subscale. Additionally, researchers explored parent/guardian information on treatment history and diagnosis, with chart validation, and followed up six-months later. The results revealed that negative religious coping and endorsement of negative support from religious communities were associated with higher depression scores. In contrast, having daily spiritual experiences, such as forgiveness and positive religious coping, were inversely related to depressive symptoms. Interestingly, the researchers found religious beliefs and behaviors corresponded only to concurrent levels of depression rather than causation or prevention. Study results noted many subscales lost significance when substance abuse and social support were added, identifying a possible mechanism for making religiosity a protective factor. The researchers cautioned religious variables and depression may not be related due to a third variable not assessed in the study.

A survey study investigating best practices to be used in treatment facilities for treating adolescents with substance use found the majority of adolescents surveyed endorsed the inclusion of spirituality as part of a twelve-step program within therapeutic community treatment programs (Aromin Jr., Galanter, Solhkhah, Dermatis, & Bund, 2006). These findings were contrary to the belief that adolescents with early onset substance use have impaired social and spiritual development that would be a barrier to employing spirituality and twelve-step approaches to treatment (Aromin Jr. et al.). Instead, the findings supported the need to investigate how spirituality shares features of other constructs such as moral reasoning, cognitive functioning, and religiosity with the

underlying understanding of development. Furthermore, results showed no gender differences. Although not part of the study, researchers suggested future studies investigate how substance use affects spiritual reawakening and leads to decreased use or abstinence.

Understanding Adolescent Spirituality From an Inside Perspective (Emic)

Researching critical elements of spirituality as identified by adolescent mental health clients through the development of an adolescent spirituality questionnaire, MacGillivray, Sumsion, and Wicks-Nicholls (2006) showed spirituality was relevant to the adolescent population studied. The results suggested more studies be designed to draw information directly from specific populations under investigation to improve understanding and use of client spirituality. A rigorous criterion has been called for to better understand how multifaceted religious beliefs and practices influence the cognitive, affective, and behavioral dimensions (Walker & Bishop, 2005).

Few studies have directly captured the late adolescent perspective of spirituality in their own words and ideas. In a phenomenological study, Mason (2001) interviewed adolescents directly to gain insight into this phenomenon. From this research, five categories and 16 themes emerged; that data is listed in Table 1.

Table 1: Categories and Themes – Adolescent Perspective of Spirituality

Categories	Themes
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Awareness	Relationship of spirituality to religion Spiritual development Major life events Influence of parent/influential adult
Spiritual Practices and Beliefs	Prayer Communal worship The dimension of spirituality in everyday life Belief in an afterlife
Inner Resources	Receiving strength Coping Finding guidance/surrendering Offering forgiveness
Connectedness	Relationships with others Relationship with God or a higher power
Self-Expression	Independent thoughts View of spirituality as a personal attribute

From "The Lived Experience of Spirituality in Late Adolescence," by D. M. Mason, 2001, a Master's Thesis from the College of St. Catherine, Saint Paul, Minnesota.

Adolescents studied were aware of their spirituality and were able to verbalize their thoughts about their spirituality. Furthermore, the adolescents were able to give examples of when they felt their spirituality was present in their daily lives. Similarly, Wilson (2004) captured data showing adolescents articulated spirituality in everyday activities such as, "walking in the woods, talking with friends, listening to loud music, dancing, riding the bus, and even washing the dishes" (pp. 40-41). Graffiti art, athletics, music, festivals, or journeys may be included as expressions of spirituality as spirituality is more about practice and method than structure, as religion is (Emmett, 2008; Labun, 1988; Quinn, 2008; Wilson & Nicholson, 2008). In this respect, language, metaphor, and

symbolism are important in understanding the concept of spirituality as linked with cultural, societal, and institutional forces (McSherry, 2006; Ortiz et al., 2000; Winker, 1995).

Individuals interact both cognitively and physically through the typical use of communication, either verbal or non-verbal, to send and receive information; these actions define boundary limits allowing individuals to care for their own values and needs while still respecting the values and needs of others (Alligood et al., 1995). The role of an individual, as actualized through symbolic interactionism, gives the individual purpose to react when stress, either positive or negative, creates need (Blumer, 1969, 2004; DiNardo, 1989).

Dissonance Between Etic and Emic Perspectives of Health-Risk Activities

In a study investigating teen parents and academic success, Perrin and Dorman (2003) used open-ended questions to elicit answers from adult mothers who had experienced teenage pregnancy. Results showed mentors, emotional support, economic support, resiliency, optimism, opportunity, and spirituality influenced teenage mothers to achieve academic success. Many participants in the study spoke about the importance of spirituality in their lives and the assistance it provided in keeping them focused, positive, and respecting life. Perrin and Dorman pioneered this viewpoint of comparing teenage pregnancy to factors that contribute to success, academic prestige, and economic independence. Previous research had studied this phenomenon only from the health-risk perspective.

Adolescent issues, such as teen pregnancy, are considered a problem by society, but may not be seen as a problem by teenagers themselves (Jones, 2003). Likewise, Sanci, Kang, and Ferguson (2005) noted adolescents would like to see health care services focused on “well-being” instead of “diagnosis of illness” (p. 416). These differences in opinion about the status of a societal problem speaks largely to the disconnect between what adolescents view as important issues to their health and what health professionals are identifying.

Behavior Modeling – How Spirituality is Learned

Interestingly, the use of spirituality as a coping mechanism by children in times of stress or turmoil was modeled to children by their parents (Kazak et al., 1997; Stuber, Nader, Hauskamp, & Pynoos, 1996). Similar to adults, children seek to find reason around them in times of crisis or upheaval (Coles, 1990), reinforcing the need to include family assessment in the assessment of children and adolescents. An important factor in family nursing is understanding the family’s spirituality; this can be much broader, or at conflict with, the individual’s spirituality (Pellebon & Anderson, 1999; Simmonds, 2005; Tanyi, 2005). During adolescence, access to society and social experience increase; the adolescent’s perspective of the family worldview or spirituality is challenged in areas such as parental control, sexual regulation, interpersonal relationships, the meaning of life, and what constitutes a good life (Youniss & Yates, 1999). Ethics is also important in family assessment; it is imperative to remain open and respectful to the perspective of the person and/or family (Tanyi, 2005). Healthcare ethics require healthcare providers use the ethical principles of beneficence, non-maleficence, fidelity, and justice in patient

interactions (Vaughn, 2009) . These principles are used during assessment and care planning, as well as evaluation of individuals and groups. The ethical principles are balanced among all involved, no person having more rights than the other. Through ethical practice, the nurse is able to remain open and respectful to the uniqueness of the late adolescent and family while providing care.

Secular Families

Often missing in the discussion of spirituality, and to a lesser level, religiosity, is the secular family. Although not purporting a particular religious or spiritual perspective, Josephson and Dell (2004) assert secular families operate under the principle of a worldview. A worldview is considered an intellectual belief system which becomes the philosophy that answers basic questions of existence such as origins, purpose, meaning in suffering, and what it is to live a good life (Nicholi, 2002; Sire, 2004). In this sense, a worldview can be contained within a religious framework or stand independently. Secular families can hold a strict stance on separation of church and state, but they will be affected by religion through culture. Examples include: all work holidays in Spain relate to Catholic saints and Holy days or public leaders referring to God in national speeches. Regardless, these families use internally derived norms defined through shared humanity to assist in decision making; this practice of morality becomes habitual and forms into a defined identity (Youniss & Yates, 1999). The ability to create explicit guidelines to demarcate moral boundaries may be more challenging for these families during adolescence as questions of relativism amplify (Josephson & Dell, 2004; Pellebon & Anderson, 1999). The lack of a predefined dogma inherent in organized religion

allows flexibility to the family, but also may open too many exceptions for a coherent message.

Methodological Issues with Adolescents

There has been a call for more qualitative research when investigating spirituality in adolescent populations to capture the adolescent's perspective and gain a deeper understanding of how they organize and prioritize the phenomenon of spirituality within their lives (Coles, Elkind, Monroe, Shelton, & Soaries, 1995; Cotton et al., 2006; Dew et al., 2008; MacGillivray et al., 2006; Wilson & Nicholson, 2008). In order to accomplish this goal, it is important researchers take into account the unique language, culture, and habits of the group they are studying in order to gain accurate information. Additionally, Ziv, Boulet, and Slap (1999) encourage a change in focus from crisis intervention to primary prevention in managing adolescent health care concerns.

Adolescent Use of the Internet

The internet and web-based resources play a significant role in adolescents' lives. The advances of wireless networking available from mobile phones, the profound use of computers and internet within school, the availability of low-cost or free internet access within schools and public libraries makes connecting to information easier than ever before for adolescents. Current statistics for American adolescents show 92% use the internet with near equality between urban, suburban, and rural areas (National Statistics Institute, 2009; Pew Research Center, 2009). Of those adolescents online, 19% have used Twitter or a similar web-based application (Social Media Today, 2009). Additionally, Facebook has a total of 63 million American users; of the 45 million active

users, 43% are ages 18-25 (Inside Facebook, 2009). More interestingly, 5,451,620 adolescents aged 13-17 years and 19,319,820 adolescents aged 18-25 are on Facebook (Inside Facebook, 2009) for a total of 24,771,440 adolescents accessing Facebook actively.

Facebook (2009) statistics note 70 translations of the online networking tool are currently available. Moreover, 70% of Facebook users are outside of the United States.

The top ten Facebook using countries are:

1. United States of America,
2. United Kingdom,
3. Turkey,
4. Canada,
5. France,
6. Italy,
7. Indonesia,
8. Australia,
9. Columbia, and
10. Spain. (Burcher, 2009)

Additionally, on November 5th, 2009, the European Union passed 12 new telecommunication reforms which included the right of all citizens to high-speed internet connections by May 2011 (Europa Press Releases, 2009). Legislation mandating internet access as a universal freedom within the European Union sets a precedence regarding rights to access information and network globally. In other countries, where the

government has legislated rights to high-speed internet access, population concentration of internet use is higher than in countries with limited access. Examples of countries with internet rights and high population concentration of use include: South Korea (77.3%), Japan (75.5%), Singapore (72.4%), Hong Kong (69.2%), Taiwan (65.9%), and Malaysia (65.7%) (Miniwatts Marketing Group, 2009). With mandated legal rights to high-speed internet, all citizens have access, including late adolescents.

Adolescent Web-Based Resources

A 2001 Kaiser Family Foundation survey (Rideout, 2001) found 75% of “online youth” used the Internet to access health information. The main topics of interest for adolescents aged 15-24 years were sexual and mental health issues, weight loss and gain, and information on major diseases such as cancer or diabetes (Grey, Klein, Noyce, Sesselberg, & Cantrill, 2005). Adolescents display autonomy in regard to their health from an average age of 15 years (Grey et al., 2005; Rideout, 2001). These statistics support Michaud’s and Colom’s (2003) assertion that the Internet is a “new and attractive channel for health prevention and promotion, especially for adolescents” (p. 287).

In response to adolescents’ eagerness to and ease of using the Internet for a variety of services, the creation of three adolescent specific websites have been developed in conjunction with western European government agencies to meet the specific developmental, emotional, and intellectual needs of adolescents and validate the proactive use of web-based resources to reach adolescent populations. The first website, titled, *Ciao*, is a French language website specifically designed to address adolescent health needs with a focus on facilitating access to counseling and health care facilities

(Michaud & Colom, 2003). *Ciao* includes a direct question application within the webpage so adolescents can get a specific answer to their particular question using a pseudonym to assure complete anonymity (Conference latine des responsables de l'action sanitaire et sociale, 2009). The use of maintaining a confidential profile is consistent with other Internet forums and therefore trusted. Adolescents are more likely to seek care from a health care provider who assures confidentiality (Akinbami, Gandhi, & Cheng, 2003).

The *Ciao* webpage has been translated into German, *Tschau* (Bundesamt für Gesundheit, 2009). Similarly, *Fred & Co* is an interactive website for adolescents to work through relationship problem solving skills with resources built in to direct adolescents to appropriate services and is available in either French or German (Conference latine des responsables de l'action sanitaire et sociale, 2009). Another website named, *Teenage Health Freak*, is registered in England and Wales and has the aim and objectives to provide web-based, accurate, and reliable information to adolescents (McPherson & Macfarlane, 2009). The huge success of this site is noted by its 98,400,000 hits since its launch in 2001 (McPherson & Macfarlane). In summary, websites which disseminate information in a developmentally appropriate, culturally sensitive manner, ensuring confidentiality, while meeting functional and interactive limitations of adolescents, are accessed with great success by adolescents. Adolescents who gather data and search for information frequently use technology to do so. Information available to adolescents should not be solely limited to adolescent health targets such as teenage pregnancy, smoking, and drug use, but extended to cover basic

issues such as general health, relationship issues, and scholarship. Additionally, adolescents have demonstrated comfort discussing and researching health issues in on-line environments.

Methodological Issues with Technology

Use of Electronic Interviewing as Part of Qualitative Methods in Nursing Research

Nursing, as a profession, has a hesitancy to identify technology as a means of caring. The literature abounds with calls for innovation and transformation of nursing curricula that integrate technology and promote the development of information literacy and technology skills (American Association of Colleges of Nursing, 2002; Billings, 2005; Institute of Medicine, 2003; McCannon & O'Neal, 2003; McNeil et al., 2003; National League for Nursing, 2003a, 2003b; Pravikoff, Tanner, & Pierce, 2005). Nursing has a deficit in nursing informatics. The average age of a nurse is older than 40 years and a National Sample Survey of Registered Nurses conducted by the U.S. Health Resources and Services Administration in March 2000 found that 70% of nurses graduated from nursing programs before 1990 (Pravikoff et al., 2005). This generation gap may attribute to the lackluster engagement of nursing with technology, specifically the Internet. Scollin (2001) noted:

Technology is readily available to [help people] make use of resources; however, if those who can benefit most from this technology are unaware of its existence, or do not have the training, support, or access to make full use of these resources, then the benefit to enhance their knowledge is of little value. (p. 249)

Embracing technology in research can assist nurse researchers in influencing research and practice, particularly if the group under investigation has a high capacity to use technology in terms of communication and connection. The primacy of the subject is at the heart of qualitative research methods; the closer the data is collected to the natural state of the individuals participating in a study, the fewer limitations the researcher must overcome in translating the findings (Rich & Ginsburg, 1999). This can be achieved in technology rich cultures, such as adolescence, by moving to their cultural norms. Adolescents have a culture different from adult populations; adolescents use language and norms to convey their culture in ways different than adult populations (Emmett, 2008; Frank & Kendall, 2001; Heath, Brooks, Cleaver, & Ireland, 2009). Therefore, nurse researchers working with late adolescent populations should strive to move towards using the culturally defined interactions of the group; this may include using on-line video, email, chats, music, or chat boards such as Facebook or Twitter. To illustrate, a 16-year-old female quoted lyrics from a song at 22:52 on Facebook to express her feelings and includes a link to the song online. She wrote, “ 'Cause I'll be there, in the back of your mind From the day we met 'til you were making me cry And it's just too bad, you've already had the best days The best days of your life.” In response, three friends were able to post comments on Facebook to provide support and relate to her feelings within a matter of 30 minutes of her posting, which occurred at nearly 11 o'clock in the evening. Adolescent culture has maximized technology as a means of personal communication; adolescents, as in this example, socially support each other via electronic communication in a manner consistent with their socially defined language

structure. Ease, accessibility, and functionality have allowed adolescents to redefine cultural norms of communication. Increased focus on immediate feedback and the ability to communicate with multiple people simultaneously has taken precedence over traditional face-to-face or verbal interaction.

The richness of data collected from qualitative interviews is dependent on the rapport between the researcher and the subject (Fontana & Frey, 1994). Richness in both on-line communication and face-to-face communication needs to be evaluated in terms of the ability to build rapport and connect with participants. In the past, interpersonal relationships and the need for physical proximity to establish a relationship were based on information developed before computer mediated communication was common; now it is known that relationships can and do develop online (Mann & Stewart, 2000). An example is online dating and marriage after computer courtships.

Other characteristics supporting online communication are increased anonymity perceived by individuals due to increased physical distance (Joinson, 2005), a higher sense of mutual involvement, and a rapid increase of intimacy based on the knowledge another person is on the other side of the screen (Mann & Stewart, 2000). The ability to modulate time to allow for reflection of feelings and thoughts prior to responding to a person is a benefit of online communication (Bowker & Tuffin, 2004; Heath et al., 2009; Mann & Stewart, 2000); the internet gives people time to build rapport through multiple interactions (Kivits, 2005). Nurse researchers, to engage successfully with participants, may use these attributes of on-line environments. Email is viewed as being a more

private way of communicating online; in a sense, it is where people “go” for a “private conversation” (Mann & Stewart, 2000).

The definition of “rich” data has also been modified in electronic environments and among cultural groups, such as adolescents. Observation of youth online shows a movement towards simplicity in communication. The dialog is raw, limited to personal status, and beautiful, in its own way. Statements are powerful and exact to capture feelings unmediated by language limitations or desire to impress with language. Youth culture reflects the technological sphere they have lived within during their lives; the rapid pace of their childhood and adolescent lives creates a sense that “life” is limited to the here and now.

The modern adolescent generation was raised with limited free time, limited free play, and limited freedom (primarily related to security and safety); these restrictions have mediated youth development to scheduled activities and scheduled play dates which include intense interactions for short periods of time. Today’s youth do not have memories of lying in the park, staring at the sky to discover cloud shapes and taking time to think, meditate, and ponder. Instead, schedules of both children and parents mandate fast output, clear and succinct. Reflection happens on an emotional, not verbal, level. Shifts in marketing to youth validate these changes as evidenced by all major marketing companies by moving advertising to on-line mediums, away from television and print, to target emotional “hit points” (Asociacion para la investigacion de medios de comunicacion, 2009; IAB Spain Research, 2009; Meeker, Devitt, & Wu, 2010).

Electronic Interviewing

Both online interviewing and face-to-face interviewing have advantages and drawbacks. In order to determine which type will provide a better opportunity to yield rich data, it is imperative to consider the study population under investigation, the research questions, and the perception of how social reality should be investigated (Hewson, Yule, Laurent, & Vogel, 2003; James & Bushner, 2009; Mann & Stewart, 2005).

Traditional face-to-face methods of interaction in qualitative research remain common. Yet, novel approaches are beginning to be used to extend qualitative research interaction into online environments for a variety of reasons. Electronic interviewing allows adolescents to engage with nurse researchers in ways that are comfortable and reduce power differentials (Heath et al., 2009; James & Bushner, 2009; Mann & Stewart, 2005). Relationships are the key to reality; therefore, it is important to enter into relationships in a way that is meaningful for both people involved to allow reality to become operationalized (Palmer, 1993). The interaction between the nurse researcher and the participant, not the medium in which it takes place, is what is instrumental to understand reality. Barring the adolescent from sharing his or her personal experience in a way that is natural, comfortable, and accessible interferes with the ability to experience reality. Maintaining customary face-to-face interviews with adolescents may impact their ability to share (Heath et al., 2009). Well articulated by Stanworth (1997), "Language is never simply a system of labeling or naming. It is a symbolic means of understanding the world, and when understood as such it extends beyond verbal articulation" (p. 20). The

attitude of the researcher, the type of communication style he or she prefers, and the way he or she relates to participants can cause distrust or resistance from participants as they may perceive a researcher's efforts as an intrusion or battle for power control, which can change the structure and content of an interview (Wright, 2006). The responsibility is on the nurse researcher to become familiar with the technology, mediums, and norms of the study population in order to capture their true reality.

The necessity to meet cultural, linguistic, and developmental needs of late adolescents from diverse backgrounds has been highlighted as a needed approach to adolescents' health (Morreale, Kapphahn, Elster, Juszczak, & Klein, 2004; Sanci et al., 2005). One innovative way to meet these needs is through internet recruitment and electronic interviews in qualitative research. The use of electronic interviews in qualitative research has been shown to be successful (Addraianssens & Cadman, 1999; Bergman et al., 2008; Bowker & Tuffin, 2004; Egan, Chenoweth, & Mcauliffe, 2006; James & Bushner, 2009; Madge & O'Connor, 2005; Stoller et al., 2009; Vitale, Lotito, & Maglie, 2009). Email interviewing has been proposed as a method to increase patient disclosure, increase geographical boundaries, and increase time needed to construct well-thought-out answers, as well as giving participants greater control of the interview process (Egan et al., 2006; Mann & Stewart, 2005).

Although email interviewing, as a new approach to qualitative research, could be seen as interrupting the natural exchange in body language possible in traditional face-to-face interviews, it could also be viewed as an opportunity to be exploited. During research studies, all participants are aware they are being studied and, in response, may

choose to exhibit a variety of true selves to present to the investigator (Lincoln & Guba, 1985). Allowing participants of a study to use the most natural form of communication within their context and reduce power differentials between participants and researchers can help offset what Webb, Campbell, Schwartz, and Sechrest (1966) term “reactivity,” which is defined as an error of the respondent due to their awareness of being investigated and how their answers may affect data outcomes.

There is a new preference for text-based communication. Current Nielsen statistics reveal text-messaging has overtaken mobile phone calls among wireless users (Covey, 2009). The average number of monthly calls versus text-messages among U.S. wireless subscribers during the second quarter of 2008 showed adolescents ages 13-17 made 231 calls versus 1742 texts and adolescents ages 18-24 made 265 calls versus 790 texts (Covey, 2009). These statistics are mirrored around the globe; world statistics for the third quarter of 2008 showed 88% of wireless users in Russia texting in the last 30 days, 85% in Switzerland, 78% in Italy, 76% in Spain and the United Kingdom, 72% in China, and 60% in Germany. These statistics show that a preference for text-based communication is growing and is changing the manner in which people choose to communicate. Researchers can take this information into consideration when designing studies and accessing demographic groups.

The use of electronic interviewing places late adolescents in an interview environment that is not distinct from their natural environment. Also, the interview environment is neutral and does not magnify the power of either the researcher or the participant (James & Bushner, 2009; Mann & Stewart, 2000). Physical spaces associated

with face-to-face interviews such as schools, homes, restaurants, and public parks, have advantages and disadvantages for both the researcher and subject; these impact confidentiality, power differentials, privacy, and accessibility (Heath et al., 2009). The online environment allows the participant an opportunity to express him/herself without exposure of new elements related to the physical location needed for a face-to-face interview.

Electronic interviewing mandates some changes to the traditional methods used in face-to-face interviews. Demystifying electronic environments has been proposed. A researcher should notify participants about the structure of email interviews as well as general guidelines for the interview, including: (a) explaining to the participants how long the research period might last; (b) establishing a pre-interview agreement about what is an appropriate time to send reminder emails if no response has been sent from the participant; and (c) discussing general guidelines of the interviewer's response time to the participant's emails (Egan et al., 2006; James, 2003; Ryan, Carlton, & Sli, 2002). Proactive activities assist in overcoming the sense of isolation that may occur online and lead to increased rapport through meaningful interaction as defined by a researcher (Ali, Ryan, & Carlton, 2002).

E-mail interviews, as noted by Hamilon and Bowers (2006), shift the expert role more to the participant and remove the controlling devices of interviews, such as tape recorders or phone schedules, thus giving more power to the participant. The traditional face-to-face method of interviewing in qualitative research is language dependent and mandates an immediate, real-time answer which fails to allow for participant reflection

and coordination of thought in answer formation (Egan et al., 2006; Mann & Stewart, 2005). The playing field can be leveled for researchers and participants through the use of the internet as an interviewing medium (Smith & Leigh, 1997). Additionally, adolescents' awareness of being investigated initiates the "guinea pig" effect and makes them choose among a variety of selves to display to the researcher (Lincoln & Guba, 1985). Therefore, to create the most natural realistic environment for an adolescent to share their "self" in has an improved chance of eliciting the most honest answers. Regardless of absolute truth, the goal of research is to uncover what people believe to be true (Marshall, 1990).

Gaps in the Literature

There are many gaps in the state of knowledge concerning the influence of spirituality on behavior during late adolescence. First, an overabundance of studies investigating adolescent behavior and predicting health-risk behaviors have been conducted, while less emphasis has been placed on the investigation of health-promotion and developmental outcomes (Scales, Benson, Leffert, & Blyth, 2000). Second, the majority of studies conducted used positivistic, quantitative designs which pre-supposed a relationship between the study variables and limited the expression of ideas from the adolescents. Third, all studies reviewed failed to suggest interventions to influence adolescent health based on the study results. Fourth, the majority of studies did not capture contextual aspects of development in the adolescent's life to inform research results. Finally, the heavy use of the internet for information and the change of preference to text-based communication during adolescence is compelling support for

modifying traditional face-to-face qualitative investigations to reflect these changing contextual conditions.

To harness the innate human characteristic of spirituality in late adolescence, in order to promote health and wellbeing, it is necessary to capture knowledge in meaningful ways, to move spirituality from an abstract concept to an intervention. Multiple professional organizations and oversight agencies mandate spiritual care is to be provided to all patients. To do so, knowledge of spirituality must be grounded in the meaning each person holds for it regardless of age or religious affiliation. The continued study of spirituality will move nursing closer to meeting recommendations and mandates on patient care. Additionally, publication of results will disseminate findings beyond nursing to other health professionals. The improved care provided by nurses to their adolescent patients will be received not only by the adolescent, but also by the family. In this sense, the adolescent is strengthened not only by improved spiritual care, but also by the cared-for family.

Conclusion – The Need for the Current Investigation

From a thorough investigation of the literature, it is apparent that late adolescents are aware of their spirituality and that spirituality has an influence on adolescent health outcomes. Still absent from the literature is a lack of understanding about the maturation of spirituality and its influence on behavior during late adolescence. During the exploration of the developmental stage of late adolescence, this researcher became aware that aspects of spirituality need to be examined for change due to maturation in order to better understand the contextual components related to the concept of spirituality.

Additionally, the researcher became sensitive to the unique cultural norms regarding electronic communication and internet use in late adolescent populations. From this knowledge, the researcher proposes the incorporation of these cultural norms in research involving late adolescents by employing increased text-based communication in order to capture the phenomenon under investigation as close to the research population as possible.

CHAPTER III

METHODS

The purpose of this qualitative grounded theory study was to develop a theoretical model describing the influence of spirituality and/or religiosity (including meaning, beliefs, and practices) on behavior during the late adolescence stage of life. During this exploration of the developmental stage of late adolescence, aspects of spirituality and/or religiosity were examined for change due to maturation. This chapter will describe the research design, sample and population, instrumentation, data collection procedures, data analysis procedures, and delimitations and limitations of the study.

Research Design

Methodology is a term used to describe both a way of thinking about a phenomenon and a way to describe the process of moving from a research idea to planning, executing, evaluating, and communicating research results (Kazdin, 2003). Ultimately, a research method is chosen based on the questions in the investigation (Creswell, 2003; Munhall, 2007b; Streubert & Carpenter, 1995). The research design addresses the purpose of the research by answering the research questions in a significant way to inform or change current knowledge.

Qualitative research acknowledges life is not lived in stagnation but is in a constant state of change which is shaped by social situations, multiple realities regarding

those social situations, personal construction of reality, and meanings (Munhall, 2007a) Investigating a “meaning” given by a participant and capturing how that meaning influences the person is at the heart of qualitative research. To understand the context of a participant, Creswell (2003) described “visiting” the participant’s situation and gathering their information personally. In doing so, qualitative research provides a researcher with the means to explore a phenomenon in an embodied form from the perspective of a participant. This manner of engagement uncovers previously obscured information by searching for uniqueness within each person, noting their differences, and incorporating time as a germane factor (Munhall, 2007a).

Qualitative Methodology

An appropriate reason to use qualitative methods for an investigation is a consequence of research question(s) posed or because the data demands it (Richards & Morse, 2007). Richards and Morse describe qualitative investigations as appropriate for several reasons, the first being the need to investigate an area where little knowledge is known or what is available appears inadequate. The study topic of adolescent spirituality continues to be investigated due to a variety of associations in the field and conflicting outcomes.

The second reason for qualitative investigation is if the purpose of the research is to create order in a complex situation that is changing, and there is a desire to investigate the phenomenon without losing the complexity of the situation through reduction (Richards & Morse, 2007). Past research on adolescent spirituality has revealed that adolescent spirituality is not a cause-and-effect relationship. Instead, historically used

research designs and study outcomes demonstrate the complexity of the relationship between the adolescent and their spirituality.

The third reason for a qualitative investigation is when the researcher wants to learn from participants how they view their situation in order to see data in a new way (Richards & Morse, 2007). This study interacted with participants in a manner comfortable, familiar, and habitual for them by employing electronic email interviewing. This interactive style is reflective of current social norms among late adolescents and allowed the researcher to see social interaction from their perspective.

A fourth reason to employ qualitative methods is if the research goal is to construct a theory based in the subjective reality of the participant rather than the researcher's etic perspective (Richards & Morse, 2007). The fifth and last reason to employ qualitative research designs is to deeply understand a phenomenon under study and to recognize the basis of the phenomenon and the variance in expression of the phenomenon (Richards & Morse). Rich and Ginsburg (1999) recommended using qualitative research methods to understand adolescent health in order to collect data in its natural state of real life, and recognize the primacy of the subject of inquiry.

The focus of this study was on late adolescents, aged 16 to 21 years. The study was conducted with a grounded theory research design in order to create a data based mid-level theory describing the maturation of spirituality and its influence on behavior during late adolescence through the emic perspective of research participants.

Grounded Theory

Grounded theory research focuses on moving beyond description and towards theoretical interpretations, identifying central details of a phenomenon and the connection between those details which are based in the social context (Wuest, 2007). Grounded theory is a research method well suited for research questions about social process (Corbin & Strauss, 2008; Glaser, 1978; Glaser & Strauss, 1967; Strauss & Corbin, 1990). Describing the influence of spirituality (including meaning, beliefs, and practices) on behavior during late adolescence, this study sought to develop a theoretical model. Grounded theory was selected as the correct approach because previous research had missed capturing how spirituality is exhibited in the maturational processes of late adolescents, which include self-identity, projection of future self, and understanding personal value and placement within the larger community. These developmental tasks are at the heart of the health-risk and health-promoting behaviors previously associated with adolescent spirituality and/or religiosity, however with unknown linkages.

Currently, an explanation regarding the influence of spirituality on behavior during late adolescence is absent. As Chapter II illustrated, the relationship between spirituality, religiosity, and late adolescent health, specifically health-risk and health-promotion behaviors, has been investigated through multiple quantitative studies employing scales and tools of varying reliability and validity. Far fewer studies have investigated the phenomenon from the adolescents' emic perspective, and these studies have been limited by their design (Mason, 2001) or population characteristics (MacGillivray et al., 2006), therefore making their results relevant, but limited.

Investigation of the influence of spirituality on behavior during late adolescence is appropriate for a qualitative, grounded theory approach because of the study topic and the study population. The topic focuses on the social change of adolescents as they move through specific developmental tasks and maturation related to attaining adulthood. Enrolled in secondary or higher-education institutions, late adolescents' lives are structured by age-specific contexts (Heath et al., 2009) and are defined by the social domains of friends, family, school, community/ethnic groups, and a society in which they strive to master the developmental tasks related to their continued growth.

A grounded theory approach best answered the research questions regarding how spirituality "works" for adolescents by discovering what meaning spirituality has for them. Theories are present in the literature, such as Fowler (1981), to describe spiritual development. Yet, absent is a theory to explain the maturation of spirituality and its influence on behavior during late adolescence. The focus on improving adolescent health outcomes and providing spiritual and/or religious care will continue to be present in health care standards. A better understanding of the influence of spirituality on behavior during late adolescence can lead to effective care in managing issues that arise in regard to development and maturation during this life stage.

Assumptions

Assumptions underlying the research method of grounded theory are: (a) change related to social life needs to be evaluated by looking at social interactions and processes, and (b) the person experiencing the interaction and process is the best source for understanding social change (Wuest, 2007). An emic description of concepts captures

more data than a basic etic description or definition because data is rooted in the context of a person's life. Elaboration of the processes surrounding an individual's life illuminates the contextual aspects and relationships of the concepts for true understanding to be achieved.

Population and Sample

Study Population

The study population was located in one international high school and one American university serving international populations in a large metropolitan area in central Spain, as well as an after-school program for high-risk adolescents in a metropolitan area in the United States Great Northern Plains. All schools and programs had English as the curriculum language and all academic institutions mandated English fluency prior to admission for upper grades. English fluency was evaluated by the Oral English Proficiency Test (OEPT) for oral language and by either the Test of English as a Foreign Language (TOEFL) or International English Language Testing System (IELTS) for written language. The population was a global mix of adolescents and included students from three continents and five countries.

The sample population for the study was at the developmental period of late adolescence and included adolescents ranging in age from 16 to 21 years. This age range was determined to be appropriate for this study based on a conceptual analysis and review of the United Nations definition of youth. The collective number of students fitting this age range at the participating institutions totaled 595 adolescents. The total number of students invited to participate through secondary education schools and after-

school programs included 377 late adolescents (classified as of December 1, 2009), and 209 students at the international university.

Entering the Field

The researcher is a certified pediatric nurse practitioner with 15 years of experience working with pediatric populations. Working professionally as a licensed school nurse, an assistant professor of nursing, and providing health services to university students permitted the researcher to work closely with adolescent populations and notice the unique features of late adolescence in comparison to other developmental stages. The researcher's working knowledge of the distinctive issues during late adolescence, as well as the natural changes occurring during this time period, were the catalysts for this study.

Prior to writing the research methodology, the researcher in her daily life (through community resources) sought opportunities to observe, engage, and interact with adolescents aged 16 to 21 years old. Working with gatekeepers at various institutions, including schools, universities, churches, and community programming, the researcher was able to accumulate 50 hours of interaction with adolescents at each age level. This time was significant to the researcher to identify the differences and similarities in social interaction among segments of the study population. Additionally, the researcher worked occasionally in health service offices in English speaking schools and universities in central Spain. This gave the researcher an opportunity to engage, one-on-one, with adolescents to understand their current social development and ability to engage with adults. From these experiences, the researcher then constructed the research methodology to reflect current social constructs of late adolescents.

Next, prior to finalizing research methods, the researcher conducted informal, semi-structured talks with three adolescents, with verbal parental consent and verbal adolescent assent, to discuss their opinions of electronic interviewing. Two adolescents were female, ages 16 and 17, and one was male, age 17. In all cases, the adolescents expressed a preference for electronic interviewing when discussing personal issues. The 16-year-old female stated, "If you ask us questions, we are going to lie to you to tell you what you want to hear. Chatting online gives us a chance to say what we really think without having to face your response." Similar responses were given regarding the power differential between the adult researcher and the adolescent participants. There was a fear of disappointing the researcher with an honest answer because the adolescents believed they knew what the researcher would want to hear as a response. This confirmed the interview error of reactivity (Lincoln & Guba, 1985).

Online interviewing through chat or email gives late adolescents privacy, time for reflection, and distance to answer without having to fear direct judgment. Additionally, the adolescents discussed the difficulty in finding time to talk with a researcher because of school, extra-curricular activities, work, and social engagements. All three subjects stated electronic interviewing would allow them to answer questions on their time line. One subject stated, "... I can answer questions when I have an answer, not just make one up that fits the question because I'm there [for the interview]." All three adolescents were overwhelmingly in favor of using electronic interviewing rather than face-to-face techniques.

Email interview guidelines were read and revised with the assistance of the adolescents. Additionally, mock email interviews were practiced with all three adolescents. The researcher noted language patterns, use of electronic paralanguage, and text length. In addition to exchanging emails, the researcher was invited to be a "Friend" on each of the adolescents' Facebook pages. Being a friend allowed the researcher to view the adolescents' Facebook pages including their wall (area of public conversation among all their friends), photos, favorite pages, and personal data. The researcher did not engage with the adolescents via the Facebook page, but observed interactions and conversations between the respective adolescents and their friends. However, the researcher does use Facebook on a daily basis to stay informed of her friends' and family's lives as well as share details of her own life using the full spectrum of services available. The researcher engages socially through electronic media to maintain relationships including posting messages to the Wall, uploading photo albums, using the chat feature, and many others. In this way, the researcher has both full grasp of the communication options and functions available in this electronic medium as well as assigning value to the online social interaction it provides.

Recruitment and Sampling Procedures

A convenience sample was employed. Of the 595 individuals invited to participate, 24 contacted the researcher for more information. Of this number, 24 chose to participate in the study. The researcher selected 21 participants for interviews and 21 of these participants completed the interviews. Criteria to include a participant in the study were contingent on the participant's willingness to participate and level of

cognitive development. Attainment of formal operations was necessary for completion of interview questions. If the researcher believed the participant was still maturing into formal operations, the researcher ceased the interview process by thanking the participant for their time and willingness to participate. The researcher continued recruitment until saturation of concept topics was achieved with variation; this occurred after interviews with 21 participants. Although data collection can continue indefinitely, 25 participants has been considered reasonable to capture variation and saturation of a topic of study (Corbin & Strauss, 2008).

To recruit participants, formal letters of cooperation were secured from two international schools in central Spain and a non-profit youth group in the United States. The researcher prepared a written script for teachers to read to students inviting them to participate (Appendix A). A letter of invitation (Appendix B) to participate was also extended to all students enrolled in Civics or Religion courses in grades 10-12 at the international secondary school because all students were required to study in one class or the other as a means of moral education. All students, enrolled in Spanish courses (either International Baccalaureate or Spanish Second Language) as a required course in the university setting, were invited to participate. The director of the youth group program distributed the letter of invitation to all youth group participants, ages 16-21 years, via Facebook.

To encourage students to visit the research web site, the researcher raffled off a gift certificate to a multi-media store. To be included in the raffle, potential participants had to visit the research web site to find the researcher's email address. Then, the

potential participant had to send an email to the researcher with a question about the study. Participation in the study was not required to be entered in the raffle. However, all late adolescents who contacted the researcher expressed interest in participating in the study. No late adolescents contacted the researcher only to express their desire to be included in the raffle.

The use of a webpage portal welcomed potential participants and email communication permitted late adolescents to express interest in participating while maintaining the late adolescent's right to privacy and control. Electronic environments give complete freedom to the participants to choose to participate or not, without the influence of parental or gatekeeper pressure (Heath et al., 2009; Mann & Stewart, 2000).

This study received Institutional Review Board permission to waive consent. Therefore, if late adolescents visited the research web site and decided to participate, it was assumed they were participating of their own free will and would represent themselves honestly. Mann and Stewart (2000) noted that the possibility of participants purposely deceiving researchers for entertainment reasons was limited and quoted a study participant,

We could all be making everything up for a laugh,-but I don't see why any student would feel compelled to feed you mis-truth over email – be realistic – where's the fun in sending prank e-mails to an [sic] social science researcher? Although due to time constraints, they will, of course, not give you the whole truth!" (p. 211)

In this sense, the need to identify deceit is inherent in all social research; yet in electronic environments deceit should be addressed during a defense of the data rather than by a researcher trying to prove a participant's identity (Mann & Stewart, 2000).

A letter of invitation to potential participants (Appendix B) contained an abbreviated synopsis of the nature and intent of the study, as well as information limiting the study to adolescents aged 16 to 21 years, and included a web address late adolescents could access to learn more about participation in the study. The web site included a home page with a greeting of welcome (Appendix C). From the home page, students could link to web pages about: the study (Appendix D), the researcher (Appendix E), who to contact for more information (Appendix F), confidentiality (Appendix G), information on the study (Appendix H), guidelines for interviewing by Email (Appendix I), and links to the University of North Dakota (UND) and UND's Institutional Review Board. Embedded within some of the web pages were links to printable forms of: the letter of invitation (Appendix B), the confidentiality statement (Appendix J), the information form (Appendix K), the email interview guide (Appendix L), and disclaimers to explain all participation in the study was voluntary and participants were able to withdraw at any time without repercussions. It was the responsibility of the researcher to disclose areas of the study where confidentiality would be breached. The researcher was aware that giving participants information about knowledge that might be exposed could inhibit the adolescent from sharing that type of data (Heath et al., 2009). All forms were developed in printable formats. Information sheets are recommended to ensure invited youth have

access to information in order to remember the details of the project after they have agreed to participate (Heath et al., 2009).

Interested participants were instructed to email the researcher to clarify any questions and to electronically communicate their intent to participate in the study. When potential participants had electronically communicated their intent to participate, the participants chose pseudonyms for their identity and completed basic demographic information such as age, education, religious affiliation, nationality, and sex (please see Appendix M).

Signature consent can be viewed as formal and adult-like for some youth which creates a barrier to participation (Heath et al., 2009) and signed consents can be seen as a protection of the researcher instead of the participant (Homan, 1991). This study received approval from the Institutional Review Board at the University of North Dakota to waive consent both for participants ages 18-21 years and for participants 16-18 years, including parental consent and adolescent assent. The study took place in an electronic environment. Late adolescents were informed of the study at educational institutions and after-school programs. A letter of invitation was distributed directing students to a web site to learn more about the study. Through the web site, interested late adolescents contacted the researcher to express their interest to participate or not. Rationale for this design was based on the ubiquitous use of the internet by the demographic group of the study in all types of electronic forums, including, but not limited to, chat rooms, public spaces such as Facebook and MySpace, and email listserves. These electronic forums do not have requirements to assure adolescents under age 18 are not engaging with persons

over 18 years of age, nor do these forums require parental consent for registration or use. Therefore, to assign barriers of parental consent and adolescent assent to the adolescents aged 16-18 years while not applying those same barriers to the entire study population would be to create a dichotomy which is not present in the actual internet environment. It was believed a rule change in the internet environment might have resulted in distrust in the study population as well as a breach of confidentiality. The attitude of the researcher, the type of communication style study participants prefer, and the way participants relate to the topics of research can cause distrust of a study or resistance to participate in a study as the research is perceived as an intrusion into an individual's privacy or a battle for power control which can change the structure and content of an interview (Wright, 2006). Therefore, to establish true electronic interviewing with web-based recruitment, it was important the research environment created for the study mimic the natural electronic environment.

Benefits to research participants included minimizing the possibility of coercion or undue influence. Their reluctance to participate in one-on-one interviewing techniques was the basis for using electronic recruitment and interviewing for this study. Contemporary adolescents have an affinity for text based communication; maintaining customary face-to-face interviews would impact their ability to share (Heath, Brooks, Cleaver, & Ireland, 2009). Also, confidentiality is an important issue to adolescent populations. A formal signature of consent can be a barrier to some adolescents. To avoid the potential of coercion or influence from gatekeepers or teachers/significant adults at the research sites, distribution of the web address of the research web site only

took place at the research recruitment locations. Therefore, no pressure was placed on late adolescents to participate or not participate through power differentials or peer conformity. The waiver of consent by UND's Institutional Review Board removed potential parental influence affecting late adolescent participation. Beyond issues related to consent, coercion and influence were reduced during interview time by the neutral environment created by asynchronous email interviews. Email interviews decreased researcher-participant power differentials and gave more control to the adolescents during the interview process (Hamilton & Bowers, 2006). Participants were able to terminate the interview without any face-to-face interaction, which may have impeded their ability to express their desire to stop participating.

Participation criteria for the study included: (a) the late adolescent had to have internet access, (b) the late adolescent had to be able to open and send emails, (c) the late adolescent had to agree to participate, (d) the late adolescent had to communicate in English, and (e) the late adolescent had to have cognitively matured to formal operations, as assessed by the researcher. Parents were notified about the study through the weekly school newsletter that was distributed to all families enrolled in secondary educational institutions. All students enrolled in the university setting were 18 years of age or older and therefore parental notification was not necessary. The parents of late adolescents participating in the youth group program were notified about the study from the youth group's Facebook page.

After seeing all participants met all participation criteria for study inclusion, the researcher began electronic interviews, via email, with the initial adolescents expressing

interest to participate. The interviews were asynchronous. The initial contact with the participant via email included a reiteration of confidentiality and ability to withdraw from the study without repercussion at any time. The need to reinforce choice of both participation and withdrawal is key for youth to feel control in an interview process and not be subjected to power differential between the researcher and participant (Heath et al., 2009; Mann & Stewart, 2000). The interview began with collection of demographic information (Appendix M) and a broad opening based on a semi-structured interview guide (Appendix O). The asynchronous nature of electronic interviewing gave participants time to reflect and respond on their answers (Heath et al., 2009; Hewson et al., 2003; James & Bushner, 2009; Mann & Stewart, 2005). Based on responses of participants, the researcher clarified and followed information as it emerged in continuing emails. If a participant response was lacking depth or clear focus, the researcher offered a probe to stimulate a response. With extended interaction, the rapport of an online conversation developed in a similar manner as in face-to-face interviews (Heath et al., 2009; Mann & Stewart, 2005).

Semi-structured interview guides were based on information the researcher believed to be important to the group under study and allowed flexibility to explore variation. Yet, topics selected by a researcher may not be important to the study population and so a researcher can miss actual issues of importance (Heath et al., 2009). To account for and avoid this problem, the inclusion of a narrative question was included in the interview guide. This question was used to uncover information that may be

unknown to the researcher but of great importance to the late adolescent. The interview guide used in this research study can be found in Appendix O.

In the study materials available on the research web site, guidelines for “pokes,” a term used on Internet sites, such as Facebook, were given to explain to participants how the researcher would give a virtual nudge to elicit a response from participants slow in answering a question. In this manner, responses to interview questions were guided by the participants; the researcher could poke the participant if the time for response extended beyond the agreed upon maximum limit. If no response was received in three working days (72 hours) after the researcher sent an email to the participant, a poke was given to the participant. If no response occurred within another three working days (an additional 72 hours) after the first poke, another poke was sent. If the participant failed to respond after two pokes, based on the predefined guidelines of the study, the researcher would view the lack of response as the participant’s request to withdraw from the study. The researcher would send no further emails. However, the participant could reply to the researcher at any time to become re-active in the study. Email interviewing empowers the participant to skip a question or withdraw from the study without the influence of the researcher-subject power differential; they are in control of what questions they answer and do not answer (Heath et al., 2009; James & Bushner, 2009; Mann & Stewart, 2000, 2005). The email interviewing guide used in this research study can be found in Appendix L.

Asynchronous interviews lasted varying lengths of time. Based on the number of questions in the interview guide and probes, as well as the guidelines for pokes, the

beginning interviews lasted a maximum of two weeks. As interviews continued and saturation was reached or new data emerged, the interview length changed to reflect the data. Key informants were contacted more frequently to validate emerging concepts, relationships, and the theoretical model. Their feedback was used to assist in data analysis and confirm findings. Information regarding the specific number of interviews, length of interviews, and participant demographics is presented in Chapter IV.

Collaboration with an educational technology specialist at a large United States university was employed throughout the study to plan, prepare, troubleshoot, and manage the technology-based component of the research study. The educational technology specialist had expertise in creating online environments to facilitate communication and exchange of ideas. Additionally, the specialist had experience with online research methods and research software tools.

Interview Guide

The study used a semi-structured interview guide to begin interviews (Appendix O). Demographic information was collected to describe the study sample (Appendix M). The researcher, who had finished her doctoral coursework, constructed and maintained the research webpage and conducted all email interviews.

Research Guide

The researcher created an interview process (Appendix N) after a review of the literature and clarification of study goals. Revisions of interview questions were based on input from the researcher's co-advisors and doctoral committee. Additionally, research questions were tested by trial with three late adolescents, ages 16-17 years of

age. The purpose was to: (a) develop email interviewing skills to be used during the interview process, (b) validate late adolescents' understanding of the information form (Appendix K), and (c) gain information about late adolescents' perspectives on the clarity and function of the questions contained in the interview guide. Mock interviews were conducted with parental permission and adolescent agreement. The late adolescents' insights and recommendations assisted in modifications to the information form (Appendix K), the email interview guide (Appendix L), and interview questions contained in the interview guide (Appendix O). Testing questions prior to an actual investigation assists in refinement and organization to establish validity of a survey instrument (Creswell, 2003)

The interview process (Appendix N) was used to organize all interviews. The interview guide was used as a starting point for initial interviews (Appendix O). Evolution of the guide, as permitted in grounded theory research designs, occurred throughout the research process.

Demographic Information

In order to describe the study sample, the researcher collected demographic data. Demographic data included: age; academic level; religious affiliation; if religiously affiliated, engagement in religious activities; and nationality. The demographic guide is listed in Appendix M.

Procedures for Data Collection

Interview Procedures

Interested adolescents directly emailed the researcher from the email address listed on either the letter of invitation or the research web site. In response, the researcher sent a greeting email (Appendix P), which included a basic overview of the study, a statement to reiterate the importance of confidentiality, and procedures to withdraw from the study. Also, the email interviewing guide (Appendix L) was added as an attachment to review study procedures presented on the research webpage. The researcher offered to answer any questions the late adolescent might have. In closing the email, the researcher gave instructions to send a pseudonym, which all interview data would be coded under, to protect confidentiality. If the participant didn't want to choose a pseudonym, the researcher assigned one. See Appendix P for the Greeting Email.

Interviews began after obtaining an adolescent's pseudonym through electronic communication. A new email was started using the pseudonym in the "greeting line;" then, demographic information including: age; education level; religious affiliation, if applicable; religious activities; country of origin; and country of current residence was collected. Following the demographic questions, the first interview question was emailed to the participant. A reminder to "reply" to the email was also written to keep the electronic conversation together.

Interviews began with the semi-structured interview guide that reflected research questions. The interview guide and probes were used only as a guideline; the participant was allowed to give direction to the interview after the initial questions were posed.

When a lull in communication occurred, a new research question was introduced to gather more information or new research questions developed to reflect the emerging theory. The research questions moved from an external focus to a more personal focus as the interview progressed.

Interviews should follow the pace and tone of participants, be conversational in style, and allow participants to express themselves (Creswell, 2003). All email communications were written in non-formal language styles and included electronic paralanguage which helped develop a rich data set. Electronic paralanguage is used to create a mood in online environments; electronic paralanguage can include repetitions, abbreviations, and verbal descriptions of sounds and feelings (Mann & Stewart, 2000). Examples include, “lol” which means “laugh out loud” or “lots of laughs” or “no, no, no, no, NO!” which means, “I really mean ‘no’” or disbelief. Additionally, underlining and capitalization are used to convey emphasis to a statement and emoticons are used to show emotion (Mann & Stewart, 2000). Examples of these types of electronic communications can be demonstrated by the phrase, “WRITING A DISSERTATION IS EASY!!!! ;o)” meaning, “writing a dissertation is difficult, but I see the irony of complaining about it.” In these simple ways, online users are able to round out their ideas and communications to add depth to the text-based format. Important to note is the strength of these additions. Due to the two-dimensional nature of the format, changes in subtleness are still lacking and therefore cannot realistically mimic the human experience (Mann & Stewart, 2000).

After the initial interview, the researcher generated memos, both theoretical and methodological. These memos recorded impressions and helped clarify theoretical

sampling and the formation of further interview questions in an attempt to capture all concepts as well as their properties and dimensions. All data were permissible, including, but not limited to, text, photos, music, videos, sound bites, or electronic links to outside media (i.e. YouTube). The variance in data structures allowed full expression of a late adolescent's description of their experience. E-mail interviews continued until saturation was reached in the data.

Data Management

All data from email interviews were copied directly from email transcripts, de-identified with the use of pseudonyms, and pasted into a Word document to be converted into an RTF file for storage, coding, and analysis using *NVivo 8* software. The researcher attended a training conference specifically designed to structure *NVivo 8* software to suit objectives of the research outcomes. Additionally, specific training was taken to manage non-text forms of data, such as, but not limited to, music, graphics, and video within the *NVivo 8* software package. This training focused on how to code specifically within multimedia data forms. *NVivo 8* permits embedding memos and linking multimedia to text-based data in the form of hyperlinks. Therefore, text describing an attached picture or video can be joined, both on screen and in print format, to analyze both components simultaneously, if desired. Researcher-generated memos and coding were captured simultaneously and added to the *NVivo 8* program for comprehensive analysis of both text based data and multimedia data.

After the completion of the first few interviews, theoretical sampling was employed and continued throughout the remainder of data collection. Theoretical

sampling is a responsive approach to data collection which is open and flexible to the concepts being derived from the data in order to discover relevant concepts including their properties and dimensions (Corbin & Strauss, 2008). Data collection and analysis occurred simultaneously and continued until saturation; saturation is defined as the point at which all concepts identified are well-defined and explained (Corbin & Strauss, 2008; Glaser, 1978; Glaser & Strauss, 1967).

Protection of Human Subjects and Treatment of Data

The protection of human subjects, privacy, and personal data is important to the process of research. This study guarded participant safety, privacy, and data in three different ways. Participant safety was maintained by following the University Institutional Review Board's processes for the protection of human subjects and complying with all regulations. Participant privacy was maintained by limiting access to research information; only the researcher had access to participant email. Personal data was maintained by de-identifying all emails after reception as well as coding, and applying pseudonyms to all data sources.

The research proposal was approved initially by the College of Nursing at the University of North Dakota, and then by the University of North Dakota's Institutional Review Board. Specific conditions in which participant confidentiality would not be protected were explicitly articulated on the research web site and reiterated in the information form. These conditions included situations in which the participant was being abused or had specific plans to harm themselves or others. Participants were

explicitly informed all responses would be confidential with the exception of the previous examples.

Interview materials were coded for confidentiality and stored in a secure computer only accessible to the researcher through biometric entry. All participants were assigned a pseudonym. A master list of pseudonyms, interview numbers, and actual names were maintained separately in a biometric password protected file. All files were backed up on an external hard-drive, also password protected, after each alteration of data. In addition, a hard copy was burnt to CD and stored in a locked space. Only data stored in *NVivo 8* were shared with advisors or expert researchers for educational purposes; this information was already de-identified and given a pseudonym. All participant identifying documents and electronic materials will be kept for a minimum of three (3) years following the conclusion of the research, and then destroyed by scrubbing the files from the computer and external hard drive and physically breaking the CD.

The study reports did not use names; if names were necessary, pseudonyms were used. Location of study participants was stated in a general tone to avoid the ability to determine identity. No one was identifiable in the study findings.

Data Analysis

The purpose of data analysis in qualitative research is to impose order on a large amount of information in order to generate themes related to a specific phenomenon (Polit & Hungler, 1995). Grounded theory strives to find core variables to social experiences and discover concepts and dimensions of the variables (Speziale & Carpenter, 2007).

Core variables have six characteristics including: (a) frequent reoccurrence in the data, (b) links to various data, (c) provides an explanation to data variation, (d) implications extend to a more general or formal theory, (e) an increase in the level of detail advances the theory, and (f) when looking for similarities and variation, maximum variation is supported (Speziale & Carpenter, 2007). Grounded theory methods described by Strauss and Corbin (1990) and Corbin and Strauss (2008) were used to analyze the data.

A constant comparative method was employed during the research process. The constant comparative method allowed data to be discovered and analyzed simultaneously to reveal properties and dimensions of the core variables. In turn, this process leads to theory development as new data were incorporated to add validity to the proposed theory or move the theory in a new direction. A qualitative research software tool, *NVivo 8*, was used to organize and manipulate the data for theory development.

An iterative process was employed and continued throughout data collection and analysis in order to identify variation of concepts while noting their similarities and differences. Three types of coding were employed: open coding, axial coding, and selective coding. Coding is used, “to build rather than test theory, to provide researchers with analytic tools for handling raw data, to help analysts to consider alternative meanings, to be systematic and creative simultaneously, and finally, to identify, develop and relate the concepts that are the building blocks of theory” (Strauss & Corbin, 1998, p. 13).

Open coding is described as breaking raw data apart to begin qualifying concepts by specific properties and dimensions (Corbin & Strauss, 2008). The data leads at this point of data analysis; the researcher follows where the data leads (Corbin & Strauss, 2008). During this phase, the researcher created memos about thoughts, questions, impressions, and possible directions for continuing data collection and analysis (Corbin & Strauss, 2008).

During data collection, each interview was read from beginning to end, including non-text data, to discover properties and dimensions. During this activity, the researcher resisted making notes or judgments, but instead tried to become the participant, vicariously. Field notes were taken and reviewed. Data analysis began after the first interview. Data were examined for depth and emerging themes. Open coding was applied and differentiation of higher and lower level codes noted to generate as many codes as possible. The researcher wrote theoretical and methodological memos to reflect the data and begin the analytic process.

After open coding the data, axial coding was begun to discover the interrelated relationships between the study concepts. Revision of previous concepts, to reflect new data, occurred consistently as part of data analysis. Comparison of data was completed at the concept level and theoretical sampling continued to illuminate concepts that appeared important to the developing theory. Theoretical sampling continued until all concepts were saturated. Explanation of central concepts is at the heart of theory; these central concepts are linked with other supporting concepts to explain what, how, when, where, and why relationships are present (Corbin & Strauss, 2008). Grounding of concepts in

the context and conditions where they were expressed was maintained during data collection and analysis as a means to avoid distortion of the data and limit the researcher's personal bias from entering data analysis. Axial codes were organized into a model within *NVivo 8* software to show relationships between concepts.

The researcher moved from open coding to axial coding in order to organize data after four interviews. The researcher wrote a story line to describe what was occurring in the data and impose order. This story line was used as a basis to integrate new information and reorganize previous data as well as identify relationships.

Lastly, selective coding was employed to polish the theory by eliminating extraneous data or filling out incomplete categories (Corbin & Strauss, 2008; Strauss & Corbin, 1990). All study concepts were grouped formally and linked to the study's core concept. Member checking was employed during selective coding. Key informants were contacted to validate the study's theory. Their feedback informed selective coding. This process allowed the researcher to develop a theory and present the data logically and systematically. *NVivo 8* was used to organize the data and represent a visual depiction of the theory structure.

Trustworthiness

The construction of realities is dependent on a form of consensual language, which needs to be accurately represented to create validity in what is known (Lincoln & Guba, 1985). Marshall (1990) makes a relevant point regarding truth in naturalistic research as compared to positivistic inquiries. She stated:

Research is the process of uncovering what people believe to be true (regardless of any absolute truth). Thus good research can be objective in that it uncovers what people believe – it uncovers a variety of subjective truths. Goodness is judged by the degree to which the researcher explores the full range of beliefs and presents them clearly and objectively. (p. 190)

Truth is linked to the reality of the person experiencing it and becomes known through discussion with others. There is no need to reduce a person's experience, to break the integrity of the person from their development and context just to suit the perceptions and needs of the listener (Palmer, 1993). Validity in quantitative research is used to describe how well a research tool measures what it intends to measure (Speziale & Carpenter, 2007). Trustworthiness in qualitative research is used to evaluate the fit between the study purpose, sampling, data collection and analysis as well as the ability to evaluate if new information was learned from the participants that could not have been predetermined prior to the study (Mackey, 2007). Therefore, trustworthiness can be verified by evaluating methodological coherence, using appropriate sample techniques, collecting and analyzing data concurrently, thinking theoretically, and moving towards theory development (Mackey). Finally, trustworthiness is strengthened with member checks and having another researcher follow an audit trail (Speziale & Carpenter).

In order to accomplish these tasks, the researcher, a pediatric nurse practitioner, drew on her expertise as she spent time, in her normal daily life, with adolescents in their natural areas of interaction, including youth groups, school sponsored events, and church activities as well as viewing late adolescent Facebook pages and Twitter "tweets." The

researcher performed the study inquiry in a manner identified as comfortable with the study population by employing email interviewing. The researcher's high use of technology, both personally and professionally, made the innovative methodology comfortable for the researcher also. Additionally, participants approved the research findings. The use of the *NVivo 8* software system allowed for peer debriefing through the capture of the decision trail and analysis.

The researcher engaged the participation of an expert in grounded theory to perform an audit of the data analysis by looking at the raw data and then the outcomes of analysis to see if it was internally coherent. The grounded theory expert was able to confirm the logical progression of data through analysis and therefore established validity of the investigation.

The researcher's interpretations and validity were confirmed through member checking as well as methodological and theoretical journaling to demonstrate the different steps between collection of raw data, data reduction, data analysis, data reconstruction, and synthesis. The electronic audit trail provided by data input into *NVivo 8* allowed the researcher to show the data in multiple ways. Additionally, *NVivo 8* permitted the researcher to interact, seek, and send feedback with an expert grounded theory researcher throughout the data collection and analysis process.

Delimitations and Limitations

All research studies have inherent delimitations and limitations which establish boundaries, exceptions, reservations, and qualifications to the results (Creswell, 2003). The influence of spirituality and/or religiosity (including meaning, beliefs, and practices)

on behavior during late adolescence was the focus of this study. Past research has investigated this phenomenon from an etic perspective, focusing on the use of scales to evaluate spirituality within adolescent health. This study maintained a focus to investigate the late adolescent's perspective, ages 16 to 21 years, without the barrier of a scale or tool to mediate the data. In this sense, the study captured data directly from those in the late adolescent developmental period.

A limitation of the study was the assumption that the late adolescents who participated were able to describe and communicate their spirituality and its influence on their behavior. The abstract nature of the phenomenon under study and the requirement to describe meaning necessitated the use of formal operations. The researcher was cognizant of this limitation within the study population and selected participants who appeared to demonstrate the necessary cognitive abilities in order to gather richer data.

Another limitation was the use of an asynchronous, electronic medium for participant interviews. The lack of face-to-face contact between the participant and researcher inhibited the ability to gather non-verbal information and create rapport in the traditional sense of qualitative research. The research web site design was developed specifically with late adolescent development in mind to assure web pages were welcoming, interesting, and filled with relevant and useful data for the subject population. Additionally, the asynchronous nature of the interviews allowed time for reflection by participants to develop thoughtful responses. The electronic divide also decreased power differentials between participants and the researcher, opening the ability for participants to speak freely without intimidation or desire to present an untrue self to

the researcher for positive feedback. The familiar electronic environment, used heavily by adolescents, was chosen to provide a comfortable environment in which to describe their ideas on the influence of spirituality within their developmental maturation.

A final limitation to the study was the unique make-up of the study population. The study population had a high number of adolescents linked to Hispanic culture, through either nationality or international experiences. Additionally, socioeconomic status varied significantly among participants, particularly between the participants living in Spain and those living in the United States at the time of the interview. The research participants self-selected into the study and the researcher sought to interview participants of both genders and all age ranges inclusive in the study; therefore, characteristics of nationality, location, or socioeconomics were not evaluated during participant recruitment. Related to the limitation of participant self-selection into the study, the researcher noted that from a total of 595 participants eligible to participate, only 24 late adolescents contacted the researcher to convey their interest in participation. The activity-filled lives of late adolescents, including athletics, music, and art courses outside of the academic day, may have impeded some late adolescents from participating due to time constraints. Additionally, the abstract topic of spirituality may have interested some adolescents who were more self-aware of this concept either generically or personally. The researcher did not investigate the motivations of the participants for self-selection into the study.

Conclusion

Grounded theory was the research method of choice for this investigation to develop a theoretical model that describes the influence of spirituality (including meaning, beliefs, and practices) on behavior during late adolescence from an emic perspective. The research design chosen was based on the research questions and the population under study. Methodological considerations, specific to the research population as well as the study design, were addressed before and during the design and collection of data. Methods for sampling participants and gathering data were explained as an integral part of theory emergence. Protection of human subjects as well as confidentiality and ethical standards of research were presented. The use of an expert grounded theory researcher for ongoing supervision and auditing of data and verification of findings with study participants increased trustworthiness.

CHAPTER IV

PRESENTATION OF FINDINGS

As stated in Chapter I, this qualitative study investigated the influence of spirituality and/or religiosity on behavior during late adolescence. The purpose of this study was to develop a theoretical model. A grounded theory research design revealed the maturational process related to spirituality in late adolescence as well as the basic social processes underlying late adolescent use of spirituality to influence their behavior. An inductive analytic process using verbatim email interviews, methodological memos, theoretical memos, reflective journals, and field notes provided rich data sources for theory construction. Continual data analysis and reflection occurred throughout the data collection process using a constant comparative method. Interviews with 21 late adolescents, aged 16-21 years, yielded diverse data capturing developmental changes and revealing the schema for the construction of a substantive theoretical process grounded in late adolescent words, beliefs, and ideas. The following research questions framed the data, from which theory was created.

1. Where do/did late adolescents learn to identify and use their personal spirituality?
2. What meaning do late adolescents ascribe to their spiritual dimension?

3. How does spiritual maturation influence beliefs and practices during late adolescence?
4. What adjustments have late adolescents made in their behavior as their spiritual dimension matures?
5. What change have late adolescents experienced in their understanding of spirituality and religion as they have matured?

This chapter will start by reporting the data collection and analysis process used in this research, identified by Strauss and Corbin (1990) and Corbin and Strauss (2008) including qualitative research process and methodology. The second portion of the chapter will present demographics of the study population. Additionally, supportive background information related to the different geographic locations and nationalities of participants will be discussed. The third portion of the chapter will explicate the process of coding, analysis, and continual data comparison to demonstrate the rigor and truthfulness of the phenomenon, causal conditions, context, intervening conditions, actions/interaction strategies, and consequences emerging from the data as well as the emergence of the substantive theory. The fourth and final portion of the chapter will present findings pertaining to the study's research questions.

Data Collection Processes

This portion of the chapter will present the data collection processes used in this study. Specifically, the method of data collection, testing of the interview guide, testing of email interviewing, and general observations made by the researcher while entering the field will be presented.

Electronic Mediums for Qualitative Interviews

Once letters of invitation were distributed to all potential participants at research recruitment sites, only those individuals interested in the study visited the research web site. After visiting the research web site, potential participants chose to email the researcher at her research email address to communicate their willingness to participate. The researcher responded to all emails. If an email was regarding a willingness to participate in the study, the researcher sent a return email to ask if the interested person had any questions or concerns. Interested individuals were reminded about confidentiality and how to withdraw from the study, and asked what pseudonym they would like to use during the interview process. When the researcher received a response from the participant, all preliminary questions had been answered, and a pseudonym had been chosen/assigned to the participant, the researcher sent a new email, using the participant's pseudonym, with demographic questions and the first research question. Emails were exchanged between the researcher and the participant until all research questions and follow-up questions were completed. Pokes were used to elicit a response, per study guidelines stated on the research web site home page, if more than three days passed (72 hours) without a response. The use of pokes maintained fluidity in the electronic conversation and permitted participants to respond to questions in a fun, relaxed atmosphere and at a comfortable rate that was flexible and fit their personal schedules.

Testing the Interview Guide

Prior to engaging in electronic email interviews, a methodological expert and the dissertation committee reviewed the interview guide. By entering the field and observing late adolescent language and behavior, the researcher was able to model questions on the interview guide in a format similar to the language used by this population. The researcher sent preliminary research questions to three late adolescents, 16 and 17 years of age, with whom she was personally acquainted. These teens reviewed the questions and shared with the researcher their feelings and ideas about clarifying the language in the questions, the understandability of words in the research questions, and how they felt about sharing personal information of this type in an electronic research environment. All three late adolescents had some suggestions as to word choice and suggestions were consistent among the adolescents. These suggestions were incorporated into the interview guide. All three late adolescents expressed positive sentiments regarding the use of electronic interviewing. They explained the medium allowed them to feel more comfortable sharing thoughts about themselves with a stranger because of the “electronic divide.”

Interviews took place in settings where some participants spoke English as a second language. Even though English fluency (reading and writing) was required and tested for in the academic institutions, there was some confusion with interview question #4 (In what situations do you realize you are using this part of who you are? What situations did you wish you had something different or more?). Among native English speakers, no problems were noted answering this question. However, among the

participants who spoke English as a second language, the lack of a concrete noun to describe the particular part of who they were (i.e. strong-willed, brave, considerate) created ambiguity to the question and the participants wrote back stating uncertainty about what the question was referring to. Therefore, the researcher modified the question to include exact examples given by the participant in their previous responses to questions in order to add concreteness to interview question #4. This modification of the interview question eliminated the confusion among English second language participants and the interview continued to progress without problem.

Testing Email Interviewing

Email interviewing was used to communicate via a virtual environment with three late adolescents who gave feedback regarding the interview questions before the actual study began. During this preliminary engagement with adolescents over the internet, the researcher noted response times, language, level of formality, and text organization of the individual responses in the emails. Based on this, the researcher amended her communication style to reflect the norms of the group she was engaging in her study. The modifications made by the researcher included the removal of lower density words, such as rubric, and the increase of higher density words, such as guide, as well as removal of firm grammar rules and spell check, use of a conversational tone, and the organization of thoughts in separate paragraphs to convey a “breath” in an electronic environment. These changes elicited a longer response from the late adolescents. Additionally, the late adolescents shared that the researcher seemed “more approachable” and “less teacher-ish” after the email structure and language was modified. Based on

teen responses to these changes, the researcher incorporated this style of communication for the actual email interviews during the research study.

Observations Made After Entering the Field

Late adolescents engage with their peers and their social network in a way that is heavily influenced by technology. Late adolescents often have a mobile phone, which allows them electronic access to the internet virtually anywhere by means of “3G Networks.” Access to the internet allows them to view, review, and send postings to their “Facebook,” “MySpace,” and “FormSpring” accounts all day. Late adolescents, even when in a face-to-face conversation with a peer, will instinctively view their push email accounts that alert them to updates on their email and social networking internet pages. The peer does not notice this activity because they are also engaged in the same activity. The conversation between the peers will often include a segment to address the changes and messages they are seeing on their mobile phones. Additionally, it is evident text messaging supersedes phone conversations in late adolescent populations, as noted in the literature review. Regardless of location, including, but not limited to, family dinners in a restaurant, academic class, church, playgrounds, shopping centers, or in a group of peers, late adolescents are attuned to the sound of their mobiles alerting them when a message arrives. Then, with startling speed and an abbreviated language (i.e. “whr r u” translates to “where are you?”), they read their messages and reply.

Administrators of educational institutions where participant recruitment occurred, expressed a belief that communication with students must include text based messaging for successful communication to occur. Administrators noted that if someone at the

institution desired to reach a student or transmit a message, it was more timely and successful to send a text message or email to the student's mobile phone than to call them. When asked about this behavior, late adolescents responded by saying, the phone mandates an immediate response to the sender. If the late adolescent is unsure of why the call is being made, he or she avoids the risk of a negative encounter by not picking up the phone. Instead, teens prefer to read a message, think about what is being said or asked, and then respond when they are ready. It is a form of control over a situation.

The large and quick response of late adolescents to the letter of invitation asking them to participate in this study was a visible sign that this age group prefers a text-based environment for communication. The researcher experienced an immediate response to her request for participants. Potential participants were required to visit the research website, locate the researcher's email address, and contact the researcher. Within the time it took the researcher to leave her first recruitment site and return to her office, there were two email requests in her research email inbox to communicate the desire to participate in the research study. Within 20 minutes, potential participants had accessed the internet, located the research website, found the researcher's email address, and sent an email to the researcher. Therefore, the researcher's efforts to understand the cultural norms, adapt research strategies to fit the needs of the population under study, and engage with participants in a manner that was meaningful and relevant to them based on information obtained by extended time in the field was shown to be appropriate and was validated.

Length of Interviews

For purposes of this study, interview length was measured by the number of emails sent rather than units of time, as typical in qualitative research. The length of interviews between the researcher and participant varied among participants. The minimum number of emails sent by a participant was seven (7) emails and the maximum was thirteen (13) emails. The average number was nine (9) emails.

The length of emails depended on the amount of information typed by the participant. Some participants had very wordy expressions while others were more direct. When necessary, the researcher offered probes to get more specific information or draw more information from a participant. Additionally, when a lapse of more than three days (72 hours) occurred, the researcher sent a *poke*, per study guidelines, to stimulate a response and attached the last research question for the convenience of the participant. All participants responded to either the first or second poke, and all participants finished their research interviews. Nearly all participants verbalized their enjoyment of the research interview process; most expressed they learned something about themselves. The interviews were conducted from April 2010 to May 2010.

Using NVivo 8 Qualitative Research Software

The researcher used *NVivo 8* qualitative research software to store and organize the study data. The researcher participated in specialized training for using the software in grounded theory research studies as well as additional training on the use of electronic sources of research data including, but not limited to, video, music, or photos.

The researcher uploaded text transcripts from email interviews and began open coding the data. As codes emerged, the researcher then typed memos and linked these memos electronically to the codes to be evaluated later as data collection continued. Personal journaling, theoretical memos, and methodological memos were also recorded in the *NVivo 8* software to allow for easy retrieval; all notes and memos were linked to the codes relevant to those memos. As coding continued and axial coding commenced, the researcher created diagrams using *NVivo 8* software depicting data visually to get a sense of the greater picture emerging from the data. Multiple diagrams were created and allowed the researcher to visualize the progress of the data throughout data collection. The electronic nature of these diagrams permitted continued manipulation and alteration of the diagrams as data analysis progressed; this allowed the researcher to continually modify diagrams to reflect emerging data.

After data collection was terminated with saturation and variation within most concepts, the researcher used the modeling tool within *NVivo 8* to create a conceptual model depicting the data. All relevant concepts, their theoretical memos, and journals were electronically linked to this model to permit explanation of model components with supportive data directly available from the research data. In this sense, the software allowed viewing of both the abstracted concepts simultaneously with the data those concepts were grounded in. Later, after coding was finished and the model was well-formed, the model was moved to PowerPoint to take advantage of the advanced formatting and design tools available in the Microsoft program.

The use of *NVivo 8* did not supersede the need of the researcher to engage in meaningful data analysis consistent with a grounded theory research design. The *NVivo 8* software merely permitted the researcher to electronically rearrange the data multiple times and in multiple ways to look at the information from various viewpoints and distances. At no time did the researcher use *NVivo 8* to analyze the data as this is not a function of the software package. *NVivo 8* was used as an alternative to traditional paper-and-pencil data storage.

Storing Data

Once an interview was complete, the email transcript was placed in *NVivo 8* for data analysis. A back up of this transcript was stored on a password protected external hard drive that was locked in a file cabinet in the researcher's home. Demographic information was stored separately in a password protected file on an external jump drive. The email messages remained in separate folders in the research email account that was hosted by a website hosting company. The research email address was security enhanced and used encryption in all messages being sent or received from the account. Only the researcher had the username and password for this email account. The University of North Dakota's IRB confidentiality standards were maintained throughout the interview process and after. All participant names and all identifying information were removed from all records.

Data Analysis Processes

The methods of data analysis followed procedures for grounded theory research to develop a substantive theory based in data that fits qualitative research goals. Good

qualitative research has the characteristics of a humanistic perspective – curiosity, creativity, imagination, logic, recognition of diversity and regularity, taking of risks, ability to live with ambiguity, use of self as a research instrument, and trust in the value of the work that is produced (Corbin & Strauss, 2008). In addition to these characteristics, there is need to also produce good science by creating works with significance, theory-observation compatibility, generalizability, reproducibility, precision, rigor, and verification (Strauss & Corbin, 1990). It is the combination of these two lists of requirements, together, that produces solid, substantial research results.

For this study, data analysis followed the Strauss and Corbin (1990) and Corbin and Strauss (2008) process of writing memos, code notes, theoretical notes, methodological notes, employing the constant comparative method during data collection, and the development of both an axial model and theoretical model. Diagrams were produced to visually review the information and better understand relationships between categories and sub-categories.

Memo Writing

Memos were written immediately after completion of each interview; and occasionally, during the interview process depending on the context of what was being expressed by a participant. The researcher recorded overall observations, impressions of the data, thoughts, ideas, and further questions stemming from an interview. All memos were labeled with the pseudonym of the participant, dated, and time stamped. The *NVivo* 8 software program allowed the researcher to record annotations within the interview transcript. Annotations included gaps in responses, tangential statements made by

participants, or a reference to an event. Therefore, the researcher placed annotations in the transcripts to record details that may have been helpful later in the data analysis process.

Code Memos

During open coding, the researcher wrote memos to capture the true nature of what was being said in an email response by the participant. After an interview was complete, the researcher read through the entire transcript from beginning to end. During this initial read through of the entire transcript, the process of writing memos was repeated and the researcher developed additional memos to describe thoughts and impressions that occurred to the researcher at this time. The researcher engaged in this process to stay as close to the data as possible. The code memos were recorded in *NVivo 8* and linked to transcripts. *NVivo 8* allowed the researcher to organize notes in multiple fashions, to view nuances between the notes, and to reorganize a memo or piece of information multiple times while never destroying the actual piece of data. This was very beneficial when beginning data analysis because it allowed the researcher to play in the data and modify it as interviews progressed and more data entered analysis. During this open data exploration, code memos were helpful to identify and develop the properties and dimensions of emerging concepts. In order to maintain control of electronic code notes, all code notes were numbered sequentially and date and time stamped. This allowed the researcher to understand the order and progression of thoughts as ideas developed.

Code memos generated by the researcher were based on phrases or ideas of participants. Some code memos were rooted deeply in concrete concepts regarding the existence of God and organized religion, while others were based on highly abstract thoughts stemming from ideas about the collective unconscious. Some code notes addressed relationships and others addressed individual tasks or states of being.

Theoretical Memos

The researcher engaged in writing theoretical memos while axial coding. During this process, the researcher evaluated concepts that emerged during open coding individually and as they related to each other. The evaluation of these relationships was recorded in theoretical memos and assisted the researcher in developing themes within the data. Comparative analysis was heavily engaged and recorded through these theoretical memos. Theoretical memos were recorded separately from code memos within *NVivo 8* and not linked to emerging concepts and themes. This was a deliberate choice during data analysis that allowed the researcher to reformulate ideas multiple times as new data emerged and analysis continued.

The theoretical memos were employed by the researcher to help identify meaning implied by the participant in the open coding process. This was achieved by going back to the interview transcripts and reconnecting an open code back to an interview text to understand the context and sentiment of the discussion; additionally, this avoided reducing concepts solely to the words captured to describe their properties and dimensions. Through this process, an understanding began to develop of the study phenomenon.

Methodological and Personal Memos

Methodological and personal memos were written by the researcher to capture issues revolving around methodological issues that developed during the study and to capture personal thoughts and feelings that emerged during the time of engaging with study participants.

Methodological memos included topics such as revising interviewing plans to manage the large number and impatient nature of study participants and to modify the delivery of interview question #4 to make it more concrete for participants who spoke English as a second language. Examples of personal memos included processing of shocking data shared by participants, such as when one participant shared that his father had shot him, and then killed his mother before committing suicide. Personal memos allowed the researcher to “drop” the pressure from an interview in a confidentially safe space by expressing the researcher’s feelings from shared expressions by the participants.

Together, both methodological and personal memos assisted the researcher in maintaining organization within the study, managing the pressure of the accelerated interview schedule, and maintaining professional distance during the research process.

Constant Comparative Analysis

Constant comparative analysis was used throughout open and axial coding. During coding, constant comparative analysis was used as a means of answering the questions of “what is this about?” and “what is the situation?” within the interview transcript and between interview transcripts. Comparing data sets to other data sets allowed the researcher to see the agreement and disagreement in the data. Both

agreement and disagreement between data sets propelled the researcher to seek explanations, which lead to deeper understanding of the data. Deeper understanding of the data permitted better theoretical sampling and study question probes to generate knowledge of process. Strauss and Corbin (1990) explain that, “process is the linking of action/interactional sequences as they evolve over time. Bringing process to analysis is an essential feature of grounded theory analysis” (p. 157).

Development of the Axial Model

Developing an axial model was part of data analysis. The model organized open codes, relating categories and properties, to draw causal relationships between categories and sub-categories via inductive and deductive thinking. The model represented characteristics suggested by Strauss and Corbin (1990), which include: causal conditions, phenomena, context, intervening conditions, action/interaction, and consequences. Open codes were reviewed and organized in such a way as to understand the divided information. This process informed axial coding by grounding the researcher in the data, but at the same time, a level of abstraction was brought to the data as a means to explain process between the categories.

Use of Integrative Diagrams

The researcher’s preference for visual analysis propelled the use of integrative diagrams during data analysis. The visual representation facilitated the researcher’s sorting of relationships between categories. The use of integrative diagrams also assisted the researcher in increasing the level of abstraction of the data by moving away from the raw data and memos to the category level. The use of the *NVivo 8* program facilitated

manipulation and alteration of the diagrams as data analysis continued. Shapes, arrows, and organization of concepts in the diagrams visually displayed concept relationships. Corbin and Strauss (2008) note the value of integrative diagrams to data analysis, "Diagrams can be valuable tools to integration because integrative diagrams are abstract but visual representations of data" (p. 107).

Development of the Theoretical Model

The theoretical model for this study, *Finding Myself: The Maturation of Spirituality and Its Influence on Behavior During Late Adolescence*, was developed during data analysis. The theoretical model moved data analysis to a higher level of abstraction than that encompassed in the variation presented by participants. The model, with explanations and supportive quotes, is presented in Chapter V.

Member Checking for Correctness of Theoretical Model

Four key informants were contacted via email for member checking of the theoretical model. Responses were obtained from three members, male and female, ages 18 and 20 years. These key informants were interested in learning more about what the model stood for; therefore, clarification of model concepts occurred before discussion of the model itself. *In vivo* codes were highly accepted by key informants, "those are our words." Key informants agreed with concepts presented and their properties and associated processes; however, they discussed some concepts at length, for example the depiction of choice presented in the processes of the model. "Yes, mutual understanding is definitely a choice. There are times when you want to connect with someone and times you don't." Key informants also pointed out the iterative nature the model depicts as

being correct, “Yeah, I do go through this over and over. Sometimes it takes me longer or shorter to go through it, but I do it.” Regarding the concept of *my core*, a participant shared, “I think I said this during the interview, but my core is me, that never changes, but what I experience modifies this for me. So, yeah, it’s always there and would be reflected in doing these things.”

The concept of *the real me* was reworked after member checking. The discussion with key informants about what this concept means and its properties made the researcher go back to the data, the open coding, and the original interviews to look at the context surrounding this category. After reviewing the raw data and with additional information provided by the key informants, the analysis took on a different meaning and this concept was reworked to be a sub-concept of *finding myself*. Key informants discussed that *the real me* was what they wanted to be comfortable and able to share with the world, but it took time to find that out for themselves. When the researcher revisited the data, this was an accurate analysis.

Key member informants agreed with the process, “based on continuing maturity,” presented in the model. They expressed strong agreement with the premise of choice that is present in processes of the model. There was critical discussion of the concept, *the real me*, and where it fit in the model. This discussion lead to review and re-analysis of the model core concept, with modification of the process, *finding myself*, so it included a sub-category, *the real me*. The revised model was returned to key informants for discussion, and the informants validated the changes as being accurate.

Member checking produced changes to the model, but also validated terms and properties within it. Through the process of confirmability, the credibility and rigor of the study and its findings were supported.

Preconceptions and Researcher Bias

Prior to beginning this study, the researcher reviewed personal biases and preconceptions about the research topic and the study population by journaling on paper in a notebook. The researcher personally evaluated her spirituality and religiosity as a practicing Catholic who is an active member of her church community. Additionally, the researcher had worked with adolescent populations throughout her professional career as a licensed school nurse in a suburban high school for four years and as an assistant professor of nursing at two universities for six years. These experiences influenced her view of late adolescent populations, their culture, and norms. In the high school setting, the researcher noted many adolescents were struggling with building relationships while having every material necessity available. From this perspective, the researcher had predetermined ideas that late adolescents had a focus on acquiring material goods and placed great value on those items, relegating interpersonal relationships to a secondary status. However, the opposite situation emerged from the study. Late adolescents who participated in the study did not address material goods as a focus, but instead, focused on intra-, inter-, and extra-personal relationships. Personal spirituality became a nucleus for making decisions and choosing direction in their life.

The dissonant nature observed by the researcher regarding public display of material goods, such as electronics, clothing, and accessories in adolescent dominated

environments to the private, relationship focused conversations between the researcher and adolescent participants led the researcher to ask, “What happens between expression of the social self and the private self?” Seeking answers to this question informed the research questions. The researcher noted bias from her experiences working with adolescent populations corrected in this study. Late adolescents are greatly influenced by significant adults in their lives and not solely influenced by material goods or advertising. Adolescents, through symbolic interactionism with peers, create culture and norms unique to members of those groups; yet, the influence of significant adults remains central to an adolescent’s sphere of influence as a living spiritual being that assisting adolescents in finding direction beyond the peer group norms.

Demographics of Sample

Study Participants

Participant recruitment occurred from an international high school and university in central Spain, and an after-school program for high-risk adolescents in the United States. A total of 595 late adolescents, ages 16-21 years, were invited to participate. A total of 21 late adolescents participated; twenty-one interviews were conducted in total; 8 interviews were completed with participants from the international high school, 10 interviews were completed with participants from the international university, and 3 interviews were completed with participants from the after-school program. The age, nationality, religious affiliation, and religious status (practicing or non-practicing) of participants are listed in Table 2.

Nationality and Country of Residence

The majority of study participants ($n = 19$) had lived or were currently living outside their country of origin. Demographic information was formally collected on the participant's official nationality, but throughout the interview process, information regarding the participants' global movements were disclosed.

The location of the international high school and international university in Spain created a study population influenced by Spanish culture or tradition. Of the study

Table 2. Demographics

Gender	Age	Nationality	Religious Affiliation	Practicing/ Non-practicing
Female	16	Spanish	Catholic	Practicing
Female	16	Spanish	Catholic	Practicing
Female	16	Spanish/Mozambican	Catholic	Non-practicing
Female	16	Spanish	Catholic	Non-practicing
Male	16	British	None	N/A
Female	17	British/Spanish	Catholic	Non-practicing
Male	17	Spanish	Catholic	Practicing
Female	18	Mexican	Catholic	Non-practicing
Female	18	American	Lutheran	Non-practicing
Male	18	American	Catholic	Non-practicing
Male	18	Mexican American	Catholic	Non-practicing
Female	19	American	Catholic	Non-practicing
Female	19	British/Spanish	Catholic	Non-practicing
Male	20	Columbian/American	None	N/A

Table 2 cont.

Female	20	American	Catholic	Practicing
Female	20	American	Jewish	Practicing
Male	20	American	Jewish	Non-practicing
Male	20	American	Catholic	Non-practicing
Male	20	American	Protestant	Non-practicing
Male	21	African American	Non-denominational Christian	Non-practicing
Female	21	American	Congregational	Non-practicing

participants, 18 were residing in Spain at the time of the interview. Of those participants, 10 described themselves as being of Spanish descent, either by Spanish nationality or by nationalities historically associated with Spanish colonies. Of those Spanish participants, 9 out of 10 noted their religion to be Catholic.

Due to the dynamic nature of maturation, it is important to reflect on the environment the majority of participants were exposed to at the time of data collection. This mandates a brief overview of Spanish history and society at the time of this study.

Spanish Culture and Influence

Spain has a history rich in complexity between race, culture, and religion. From the 8th Century until 1492, the Spanish led a Reconquest to push the Moors south and out of Spain. This military and political action influenced the social structure and attitudes in Spain. Up until this point, those who lived in Spain had led a life structured on an agrarian feudal system which provided, although unfairly, work and resources for the majority of the population (Garcia de Cortazar & Gonzalez Vesga, 2000). But during the

seven centuries of fighting with the Moors, the monarchy and aristocratic powers needed money to fight. Merino wool was selected as a cash crop and common lands were seized for grazing sheep. The number of workers needed to raise sheep was significantly less than needed to raise crops, therefore peasants, previously employed and fed by the land, now became displaced and starving. During the Middle Ages, Spain was estimated to have 14 million people, but by the end of the 18th century, the population had dropped to only slightly above seven million (Beevor, 2006).

Displaced peasant workers were absorbed by the military and began a mixed relationship between the Catholic Church and the military (Garcia de Cortazar & Gonzalez Vesga, 2000). During these seven centuries of Reconquest, the Church's role had been to promote military action and participation. When Queen Isabella I de Castile took power in 1474, the position of the Church began to take momentum. Queen Isabella's marriage to King Ferdinand de Aragon in 1479 brought two kingdoms of Spain together and thus began Spain's modern history. Under the direction of "the Catholic Kings," as they are known throughout Spain, Isabella and Ferdinand began and supported a Church driven nation. The colonialism of the late 1400s and early 1500s was financed and promoted by the Church; as a result, the Church linked any new Spanish territories to the Spanish nation (Beevor, 2006).

The Spanish Inquisition (1480-1492), a proliferate action directed and led by the Catholic Church, forcibly expelled, executed, persecuted, or forced conversion of remaining Muslims and Jews residing in Spain (Garcia de Cortazar & Gonzalez Vesga, 2000). The Church controlled the entire population during this time and any person

voicing concern about these “religious” practices was accused of both religious and political heresy. The Church controlled the population through education also; it taught the benefits of suffering, endurance, and composure in the face of death (Beevor, 2006). At this time, Catholicism as a whole was under much scrutiny in Europe due to corruption. Spain became the protector of the Church against heresy among the population and against weaknesses within the Church itself (Beevor).

Although Spain and its kingdoms had been integrated through royal marriage, during the 1500s the monarchy did not wish to continue using royal marriage to link nations; instead, it preferred the Church (Garcia de Cortazar & Gonzalez Vesga, 2000). This created tension between Spain and other nations. Wars with France and the destruction of the Spanish armada by the English took a huge toll on the Spanish state. The gold and wealth brought back from colonization of Central and South America were used to build and decorate churches. As a result, there was no money to feed the masses or support Spain’s economic infrastructure. In response, the Church, tied closely with the military, supported a medieval economic system where nobility, as well as the Church and military, were supported by the general population (Garcia de Cortazar & Gonzalez Vesga).

The rigidity of the ruling order and lack of modern economic strategies led to numerous working-class revolutions during the latter half of the 1800s and early 1900s (Garcia de Cortazar & Gonzalez Vesga, 2000). Coups, corruption, and internal fighting sustained a constant struggle between the people and the Church. By the beginning of the 20th century, poverty was overwhelming in Spain; life expectancy was only 35 years, and

over 500,000 Spaniards emigrated to the Americas (Beevor, 2006). Staying neutral during World War I (WWI) helped alleviate some of the economic burden in Spain by bringing economic growth, but this faded after the war was resolved and the political system returned to old ways (Garcia de Cortazar & Gonzalez Vesga).

Following WWI, the population became disillusioned with the state of Spain. Powers of corruption, overthrow of the monarchy, and military powers influenced Spain's future (Garcia de Cortazar & Gonzalez Vesga, 2000). A civil war began in 1936 and lasted until 1939. This complex engagement resulted in Spain coming under the dictatorship of General Francisco Franco. Franco created a military enforced society heavily linked to the Catholic Church. Examples of the Catholic influence during the 40 years of Franco's rule included the criminalization of contraception, divorce, and abortion (Montero, 1995). The support of the Catholic Church by Franco can be noted by his regulation that no synagogue or Protestant churches were allowed to put up any religious symbols or markings that could identify themselves as such (Crow, 1985), and by the necessity that all children born must have a Christian name in order to be registered with the state.

The culmination of all these historical events, religious influences, and mixed people is a nation of individualism (Cuevas, 1998). Crow (1985) stated elegantly, "Spaniards have never learned to live or to work together.... This excessive personalism undoubtedly contributes to a weakened statehood" (p. 9 & 11). Spaniards have attained high success in endeavors engaged in individually, such as the arts and writing, and less success in group endeavors, including government.

United States-Based American Participants

Three participants were of American nationality and based in the United States (U.S.) at the time of their interviews. One participant reported their nationality as American and the other two participants reported their nationality as Mexican American. One participant had lived outside the U.S. previously. These participants attended a faith-based, not-for-profit, after-school program for high-risk adolescents. Interviews with these three participants were not as word-rich as the interviews with other study participants. Interviews with U.S. participants contained direct answers to research questions with less embellishment or examples than did interviews from Spain-based participants. Although socioeconomic status was not collected as part of demographic information, the difference in responses between the U.S. based participants and Spain-based participants propelled the researcher to investigate possible reasons for this variance. This distinction may be explained by the influence of socioeconomics on language. A study comparing language in homes based on socioeconomic status revealed children in homes with higher socioeconomic levels hear more than 2,000 words an hour, children in working-class homes hear just over 1,000 words an hour, and children in homes where parents receive welfare assistance hear approximately 600 words an hour (Hart & Risley, 1995). Socioeconomic status provides a possible explanation for the less rich and less descriptive answers provided by participants located in the United States.

Coding, Data Analysis, and Theory Development

This section will explicate the process of coding, analysis, and the constant comparative analysis to demonstrate the rigor and truthfulness of the phenomenon, causal

conditions, context, intervening conditions, actions/interaction strategies, and consequences emerging from the data, as well as the emergence of the substantive theory.

Open Coding

Coding and data analysis began from the commencement of the first interview. To remain as close to the data as possible during open coding, the researcher used *in vivo* codes. *In vivo* codes retain the words of the participant in naming what is going on (Wuest, 2007). *In vivo* codes were used exclusively during data analysis.

Open coding was used to begin the analytic process. Open coding is described as, “breaking data apart and delineating concepts to stand for blocks of raw data...qualifying those concepts in terms of their properties and dimensions” (Corbin & Strauss, 2008, p. 195). Open coding allowed the researcher to look closely at the data and discover terms, concepts, themes, and events that were embedded in the data. A concept that was identified early in the interview process, and frequently afterwards, was the participants’ description of *my core*, their personal spirituality that is maintained throughout development, but modified with experience. The process of continued open coding with comparative analysis progressed data analysis to capture multiple properties and dimensions of the concepts such as: “vital part of identity,” “lasting impact,” “my conscious,” “soul,” “cannot be changed,” and “develops as time goes by.” *Humans need a guide* was another open code developed from the first interview that emerged in many subsequent interviews. Open coding allowed properties and dimensions of this concept to evolve and to show variation. Properties of the concept *humans need a guide* that were identified were: “role model,” “sound structure,” “learn and establish with dimensions of

school system,” “easier to see and follow than create,” “from parents,” “teachers and faculty,” and “social environment.” The use of open coding permitted full exploration and variation among participants to the code of *humans need a guide*.

Breaking the data apart during open coding helped the researcher discover important elements, concepts, and processes essential for continued data analysis and theory development. A list of open codes are presented in Table 3.

Table 3. List of Open Codes

The way she carries herself	Build relationships	Lets things come and go
Comparison to when I was young	Lives in the present	Thinking about the future
Everything has started to become clear	Something guides me	What drives me
Effects on my development	Mutual understanding	Humans need a guide
Spiritual role model	Control of myself	Get to my core
Further discovery	Peace between all forms	I stick to my guns
We are all people	Dealing with problems	I have resources
I can get along with anyone	Chief characteristics	Finding myself
Teaching me to engage in life	Evolution of who I am	My core
He does believe	Spirituality	Religion
It	Close with my family	Values I've amended
Most out of every hour	A very difficult life	Independent
I am quite reserved	He only sees defects	Friendship
Strong as I am now	The real me	We support each other
How to be a better person	Achieve what I propose	Individual's leadership
What it is to love	Was a God	Human spark
Starting over	Strong and happy	

Simultaneously, while open coding, the researcher engaged in memo writing. Memos were written to capture thoughts, ideas, trends, and variance in captured and emerging codes, theoretical thoughts, and methodological issues. Additionally, the researcher used personal memoing to capture and reflect on bias. Memo writing secured ideas that were forming; the initial ideas about process, relationships, and theoretical sampling were preserved for later review. Open coding continued, using comparative analysis, until the emergence of new categories ceased and coded categories had well described properties and dimension with variation signifying conceptual saturation.

Axial Coding

Axial coding is a process of, “crosscutting or relating concepts to each other” (Corbin & Strauss, 2008, p. 195). Axial coding is important to discover structure and process within data. During axial coding, the properties and dimensions of concepts were examined, compared, and contrasted to understand the phenomenon, the causal conditions, the context, the intervening conditions, the action/interaction strategies, and the consequences. Axial coding was engaged simultaneously while open coding since, “minds automatically make connections because, after all, the connections come from the data” (Corbin & Strauss, p. 198). The researcher used analytic strategies of asking questions and making comparisons to continue to stay close to the data and not overlay researcher bias in the analysis. Axial coding is a key feature of grounded theory research as it permits the discovery of fragmented pieces of data to relate to each other (Strauss & Corbin, 1990). Axial codes can be found in Table 4.

Table 4. Axial codes.

Humans need a guide	Something guides me
My core	Control of myself
Effects on my development	What drives me
The real me	Build relationships
Model my behavior	Finding myself
I have resources	Everything has started to become clear
Sensing this human spark	

Axial Model

An axial model was created to visually describe connection between themes and categories derived from the data during axial coding. Connections in the model emerged during data analysis. The axial model visually organized data into context, core concept, causal conditions, actions/interactions, intervening conditions, and consequences. Additionally, concept processes were organized to visually convey process inherent to the model, as revealed by study data.

Selective Coding

Selective coding was the final stage of data analysis. Selective coding is the process of refining and integrating categories to achieve abstraction. This occurs by pulling, “all research threads together to construct a plausible explanatory framework” (Corbin & Strauss, 2008, p. 264). The outcome of this process was to identify core process concepts. Core process concepts are the foundation for theory construction (Strauss & Corbin, 1990). The final analysis yielded five core process concepts: *humans need a guide*, *what drives me*, *I have resources*, *sensing this human spark*, and *effects on*

my development, with a core concept of *finding myself*. Many of these core process concepts had sub-categories. These processes were the basis for theory construction and are presented in Table 5.

Table 5. Core Process Concepts

<u>Core Process Concepts</u>	<u>Sub-Concepts</u>	<u>Process Concept Links</u>
Humans need a guide		Mutual understanding
What drives me	Build relationships Model my behavior	Evolution of who I am
I have resources	My core Something guides me	Everything has become clear
Sensing this human spark Effect on my development	Control of myself	Further discovery

Core process concepts were grounded in the data of the participants. Linking these core process concepts were the ideas of: *mutual understanding*, *evolution of who I am*, *everything has become clear*, and *further discovery*. These links show the maturation of spirituality during late adolescence and the process between spirituality and behavior specifically within the contextual aspects of the participants' lives. These energetic processes are dynamic and modify their expression as the adolescent matures while not losing relevance. Together, the core process concepts, the process concept links, and the contextual aspects these concepts exist within create a substantive theory, titled, *Finding Myself: The Maturation of Spirituality and Its Influence on Behavior during Late Adolescence*. This theoretical model will be presented and discussed fully in Chapter V.

The remaining sections of this chapter will focus on relationships and resources derived from the data as relevant to the research questions posed in this study.

Findings Related to Research Question #1

Where do/did late adolescents learn to identify and use their personal spirituality?

All participants were able to describe a significant adult who, through their actions, demonstrated spirituality. Participants were able to explain what behaviors in the significant adult they identified as being spiritual as well as why the behavior was spiritual. Interestingly, most participants noted the distinction between religion and spirituality. Even when the significant adult's behaviors were religiously related, such as attending worship services or praying, the participant moved the discussion away from religion and defined the spirituality of the behavior in contrast to the religion. This distinction between religion and spirituality, as well as the participants' ability to identify spiritual behaviors in a significant adult, supports the notion they seek and need a guide. Because participants revealed this need in their responses, *humans need a guide* was noted as a causal condition in the axial model.

Humans need a guide was a theme that emerged from the data. Religion was a sub-concept of this concept; the religious activities identified by participants were discussed in relation to a significant adult demonstrating them as a behavior expressing spirituality. Independently, religion did not emerge as a guide for the participants of this study.

The following quotes are the participants' words describing the influence of the significant adult as a guide. One participant shared:

I feel like humans in general need a guide, it makes it a lot easier to see and follow than to create, because you know the outcomes where as if you just move on your own you don't know where that will lead you.

Later the same participant shared:

I have had role models (my two brothers, and my father of course) which I have been able to watch to see how they grow and develop. Naturally, I would follow some of the characteristics that would end up benefiting them and avoid those that were detrimental.

Another stated, "I model my behavior after my Dad, because he handles situations well and believes that there is 'a formula for everything.'" A younger participant explained:

The most spiritual person i know is my grandmother. She has had a very difficult life.... She tells me that no matter what God always listens to you and you always have to have faith in what you believe in, because if it is like that, you will always succeed in life.

Participant quotes describing the distinction between religion and spirituality in the actions of significant adults were numerous. One participant shared:

What makes her spiritual is not really her religion, but the way in which she carries herself. My mother has moved through many stages in life, some very sad and some happy, but through each she has survived, driving herself to accept whatever it is that is in front of her....I wouldn't necessarily say that she practices religion to express her spirituality. Rather, it is just a separate entity that goes

along side while she expresses her spirituality through her daily activities and involvement with others.

Another well described example was:

I do think that spirituality is different than religion. One can be spiritual without being religious. For example as I said before I think my father is spiritual, as he has faith in something (not necessarily god) but believes that there is a higher power, yet he does not keep kosher or nor strictly adhere to all the rules for every holiday. Religion seems more concrete than spiritual; a set of rules and regulations and a strict belief system. Whereas spirituality can be a value system and beliefs that allow people to feel peaceful or at ease. Spirituality seems more inspiring in some ways than religion, in that I see religion as dictating a way a person should live, whereas spirituality for a person is living so they feel they get the most out of their life.

In summary, the theme, *humans need a guide*, and the sub-concept of religion, was expressed by participants as a connection with a significant adult who displayed to participants a living spirituality in natural life. From these examples, the participants were able to describe properties they identified as spiritual and why those properties were important to them. Participants made a clear distinction between religious activities demonstrated by significant adults in their lives and the spiritual meaning behind those activities. This distinction between religion and spirituality, as well as the emphasis placed on the spiritual aspects of the behavior was what participants were most closely aligned with.

Findings Related to Research Question #2

What meaning do late adolescents ascribe to their spiritual dimension?

Nearly all participants described their spiritual dimension; some described a secular spirituality and others a religious spirituality. Participants were able to describe what behaviors they engaged in that related to being spiritual. Important to note, participants did not describe their spiritual dimension with the same language as they described the generic concept of spirituality. Participants described their spiritual dimension in a highly personal way, as a personal attribute, while describing the concept of spirituality objectively and in a detached manner.

My core was a concept that emerged from the data and is a sub-category for the core process concept of *I have resources*. *My core* was viewed by participants as being unique solely to them as a personal attribute. For participants, *my core* was the essence of who they were.

Participants described *my core* as “finding a way to live that provides inner comfort, that just feels right. Its believing in something 'out there' even if you're unsure of what that is.” Another participant discussed where *my core* emerges.

I think my “core” comes from the things that have the longest-lasting impact on who I am, like my upbringing, which reflects strongly on me. This is part of my history and cannot be changed. Now that I think about it, I guess you could call it my soul or my spirituality. Whatever name you give it, I would define it as part of me that generally stays the same even through many years of life and experience. This isn't to say I won't mature or develop as time goes by, but I

think a core is a vital part in someone's identity and it's what makes someone unique. If everyone could be molded into whatever you want to make them, then everybody would be the same.

Other participants discussed the influence of *my core* on their behavior.

I think the "it" is in many ways my conscious. In everyday life when I make decisions I am influenced or perhaps biased by the the values my family and my faith have instilled in me. I notice when I feel that something is definitively right or wrong I access this "it" because at least for important decisions, I need to know that every part of my being is confident with my choice.

In summary, the participants were able to articulate what they believed their personal spiritual dimension to be, how it emerged in them, how it continued to mature, and the impact it had on their behavior. Together, this information highlighted the meaning of the spiritual dimension as being highly personal and related uniquely to the individual experiencing it.

Findings Related to Research Question #3

How does spiritual maturation influence beliefs and practices during late adolescence? Participants were able to describe how their personal spirituality, described by the concept *my core*, influenced their beliefs and practices as they matured. Participants discussed strengthening and firming their values and morals in an interactive process. Participants undertook active behaviors and choices to create conformity between their private and public selves, their ideas, values, and morals, and ability to

engage in activities that supported their ideas, values, and morals even if their peer group did not. This process was described by participants as *finding myself*.

Finding myself emerged as the model's core concept describing the meaning late adolescents ascribe to their spiritual maturation and its influence on behavior. The beliefs and practices late adolescents engaged in moved them through the process of finalizing their understanding of who they were as a complete person.

Finding myself was shared by participants as being more comfortable with themselves and understanding who they were.

I think I have more confident with my goals, because I know in the long run that is what will make me happy and bring me success. It's harder for other people to judge me based on my goals because people my age are more likely to judge on based on appearance and actions at a given moment.

Similarly, another participant shared:

When I'm with my friends and when I have to express my point of view, In these situations I know that I am acting by myself and that I behave the way I want and think that is wright and without having my mum next to me. I like it. I feel independent and just me.

Younger participants were still feeling out who they were and comparing themselves to their peers to better understand themselves.

I just think that that would make me really happy but I don't really know what God has prepared for my future, I just hope it will be marriage, work and family. I don't know I am too young. One of my best friends has given up marrying

someone and making a family, she is going to be “numeraria” (Opus Dei), you know something about being a nun. She wants me to be that too, but I think that is not my thing I just don’t see me as that, I need more, I want to give more. I just pray and wait, I am not in a hurry, I should be patient.

Likewise, a participant wrote:

I have come to realize the past few years that as valuable as I think that [taking care of other people] is, there is no doubt about the fact that I am definitely taken advantage of. In these situations I wish I had a stronger self of sense that wasn’t just defined by other people.

Other participants shared frustration and new awareness in learning more about themselves.

I volunteer for EVERYTHING! I find that I am giving when I give my time to listen, to help someone on a project, or just to listen. Sometimes I realize I can’t do everything and often don’t make enough time to get my own things accomplished. I need to learn balance and when just to say no.

In the same way a participant expressed:

I felt really unsure of myself and I hated that I felt different and I constantly asked my parents why I couldn’t enjoy partying like everyone else. Occasionally I still ask why I’m weird? but most of the time I just know drinking heavily isn’t for me and it’s fine.

Another participant shared:

I am not sure I am comfortable with belonging to a religion that I don't feel connected to and even have major problems with certain beliefs, but that doesn't mean I don't want to have a relationship with God. Spirituality is something I do want in my life and hope to discover on my own where I can find it.

In summary, participants were aware of their spiritual maturation and discussed how that maturation influenced their beliefs and practices, both on the intrapersonal, interpersonal, and extrapersonal levels. Participants acknowledged previous changes or awareness while discussing their future desires for continued change or increased awareness. These activities highlighted the iterative process and active engagement needed for the continued maturation and development in adolescent populations.

Findings Related to Research Question #4

What adjustments have late adolescents made in their behavior as their spiritual dimension matures? Participants discussed the changes they had made in their behavior as spiritual maturation progresses. Participants discussed their motivations at a particular time, generally situation-based, and reflected on those experiences. Past actions were re-evaluated by participants; they discussed present desires based on those past events.

These descriptions provided data for the concept, *what drives me*.

What drives me, and sub-categories, *build relationships* and *model my behavior*, described specific practices and beliefs that drew participants into action. A connection was made between their personal spirituality, *my core*, and the behaviors they

demonstrated. A participant described abstractly how his behavior adjusts due to his spirituality.

My principle motivation is family, and reproducing all the opportunities I was able to have as a child to my children to be. I feel like that whenever I am in trouble or I think of a situation in which I am in trouble, my family is always or would always be there. Their impact on my life is my driving force, for my family, I would do anything. I would say the example set by my older brothers, and the fact that I owe my parents so ever much for giving me such a good life is what drives me into a successful adulthood.

Another participant shared more concretely ...

I do think that my sense of self in terms of my goals influences myself with peers and adults because I find myself judging others based on what I feel are important attributes, such as having aspirations and working hard.

And another stated:

Living on my own in New York City one summer also really added to my assuredness in what I want out of life....not everyone my age is this aware. Throughout my life I have always been a little different from kids my age. For example, as soon as I got home from school I would have a snack and start my homework immediately and wouldn't watch television until I was finished. In college, while I did join a sorority and the majority of my friends drink to excess, I usually do not, and if I do it's only one glass.

One participant stated succinctly, “I most of the time know what I want and because I am so definitive its easier for me to go after it. That is my motivation.” And another said, “I try to learn from my mistakes and I try not to commit the same offense twice or try to avoid the same mistakes of other people.”

Participants were able to describe both the actual adjustments in their behavior or the motivations behind making adjustments in their behavior. Participants were aware of this maturation and had awareness that they built on it as they continued to mature.

Findings Related to Research Question #5

What changes have the late adolescents experienced in their understanding of spirituality and religion as they have matured? All participants made a distinction between religion and spirituality. Participants did not discuss the generic concept of spirituality as undergoing change as they matured. However, the personal dimension of spirituality, identified as the concept, *my core*, was discussed. This concept was previously addressed in relation to Research Question #4. Instead, the distinction participants made between religion and spirituality will be discussed.

Participants described religion in multiple, but similar ways: “a set of habits, without true connection to spirituality,” “religion for me, is believing in something, in someone, having faith in something greater,” “religion, as I understand it, is more of the institution that provides the rules and regulations of the beliefs of the people,” and “religion to me is something more structured and in a way, an external force.”

Similarly, participants described spirituality in multiple but similar ways: “a person doesn’t need religion to be spiritual,” “a value system and beliefs that allow

people to feel peaceful or at ease,” “the means by which people search for a higher meaning or order in the universe. Questions such as, ‘why am I here?’ or ‘who/what created the universe?’ spring out of this search,” and “spirituality for me is more to do with yourself, more with each ones morals and way of life and what you think is correct, not necessarily doing what the church or other institutions say you should do.” More specifically, one participant shared their view of spirituality,

Spirituality is like a personal journey, a decision one makes to find something that they have faith in and believe to their core because it betters their life. It doesn’t have to tie you to one God, or the God from the culture you came from. It’s something you have to work for instead of just following.

Participants saw a distinction between religion and spirituality by virtue of the behaviors exhibited: “she practices religion to express her spirituality,” “she expresses her spirituality through her daily activities and involvement with others,” “sheer endurance, wisdom, and adherence to his beliefs and ideas collectively contributed to his identity as a spiritual man,” and,

I don’t consider her spiritual because of being religious, that’s only part of her spirituality. She is always happy, always seeing the good side of things even if the situation seems completely negative. She never gets angry and tries to do her best at everything and help people whenever she can.

And other participants described the difference between religion and spirituality generically: “I do think that spirituality is different than religion. One can be spiritual without being religious;” “Spirituality seems more inspiring in some ways than religion,

in that I see religion as dictating a way a person should live, whereas spirituality is for a person so they feel they get the most out of their life;" and "I believe what makes a person spiritual, is that they believe in other factors outside their physical body that play an intricate role in their life."

Some participants saw religion and spirituality as separate entities, but related. Participant quotes included, "For me, religion and spirituality have to be intertwined, but at the same time, I think that spirituality can stand on it's own;" or "he always wanted us to know about the amazing connection that there is between the human body and our spirit, a connection through which he has taught us that a person is mostly spiritual and not physical."

In summary, participants noted that religion and spirituality are separate entities, but may be practiced together, as some of the significant adults demonstrated or participants practiced. Together, this highlights the need to determine the personal perspective of the late adolescent on religion and spirituality to understand their unique viewpoint. Due to the variance among participants, it cannot be assumed that if a late adolescent is practicing religion, they are also spiritual or, in contrast, if they are spiritual, they are practicing a religion.

Chapter Summary

This chapter presented the findings of this grounded theory research study, which examined the influence of spirituality on behavior during late adolescence. Demographic information was presented and data collection and analysis processes reviewed. A description of the open, axial, and selective coding that occurred as part of data analysis was presented. In the final part of the chapter, findings were reported specifically related to five research questions posed in Chapter I.

CHAPTER V

THEORETICAL MODEL

This qualitative, grounded theory study examined the influence of spirituality and/or religiosity on behavior during late adolescence. The purpose of the study was to understand the influence of spirituality and/or religiosity on behavior in late adolescence. The outcome of the study was a new theoretical model that describes the maturation of spirituality and its influence on behavior during late adolescence. This chapter will introduce the theoretical model developed during this project and provide a descriptive discussion of the model. Following the descriptive discussion, an examination of the analysis of data supporting the model, including supportive quotes from the participants, will be presented.

The theoretical model includes five core process concepts. Following each core process concept and its associated process concept link, a discussion of the relevant literature and the relation the concept has to an embodied perspective (“embodied perspective” was described in Chapter I), will be presented to inform both the study’s findings and the theoretical model. To begin, the framework of symbolic interactionism (Blumer, 1969, 2004) will be addressed to frame the discussion of the theoretical model.

Symbolic Interactionism

Symbolic interactionism purports humans are active participants in their world and do not choose actions based on a stimulus-response motivation. Social interaction is

driven by symbols; symbols represent a social object that has been given meaning through consensus by individuals, groups, and society. Therefore, humans choose action based on what symbols are present, what those symbols mean, and in what context those symbols exist. Important to recognize is that woven into this process of action are motives, images of goals, perceptions of objects, ideas, feelings, norms, values, situations, and plans of possible actions and not just parts of what is to be determined. Everything is present, competing, and relevant when a human chooses an act (Blumer, 2004). Therefore, internal processes run equal, simultaneous, and concurrent with external processes when a person chooses an action.

There is an embodiment to all these factors. No one factor can be reduced or removed and allow us to still completely understand the process of how a person chooses an action. A human choosing an action cannot reduce themselves to a single motivation in choosing that action. Similarly, interpersonal interactions demand an embodiment of the individual actors because the act of one person is embodied in the act of another. To reduce and isolate the act of one person from the action(s) of another person removes layers of meaning, beliefs, and values from the interaction, therefore nullifying the agreed significance of the symbols between the actors. To fully understand action, including meaning, beliefs, and practices, it is imperative to move away from reducing the experience to objective details, whether psychological, environmental, emotional, or behavioral, and focus on the interaction occurring between all actors, symbols, and changing social definition of the symbols. Blumer (1969) acknowledged the discomfort stemming from vagueness in trying to know all the factors influencing human conduct

due to all these processes running simultaneously. He encouraged “a working relation between concepts and the facts of experience wherein the former can be checked by the latter, and the latter ordered anew by the former” (p. 173).

It is with this openness to vagueness that the model, *Finding Myself: The Maturation of Spirituality and Its Influence on Behavior in Late Adolescence*, was created. The model embraces the inherent elusiveness of cause-and-effect, while still providing explanation between concepts and experiences to increase understanding. Through the conceptual lens of symbolic interactionism, the researcher discovered a process of spiritual maturation, and the influence that spiritual maturation has on behavior, including meaning, beliefs, and practices, during late adolescence. The researcher did not discover a direct link between religiosity and maturation or behavior; instead religiosity was expressed by some participants as a way to practice their personal spirituality. Although this process is embodied within the life of the late adolescent, it will be described in terms of its parts for purposes of discussion.

Beginning Theory: Finding Myself

A substantive theory emerged from this study and is titled, *Finding Myself: The Maturation of Spirituality and Its Influence on Behavior During Late Adolescence*. The theory is illustrated in Figure 1. A qualitative approach to this study revealed the complex, embodied maturation of spirituality within the development of late adolescence, and its influence on behavior. This theory emerged as a consequence of data analysis and describes the relationships between core process concepts and process concept links rooted in the contextual conditions. The core concept of *finding myself* symbolizes the

dynamic and evolving embodied interaction between the late adolescent and themselves, persons around them, and the larger world as they continue through the developmental period of late adolescence. This theory explains the process of how late adolescents are aware and are actively involved in their development, which is heavily influenced by their spiritual dimension.

**Finding Myself :
The Maturation of Spirituality and Its Influence on Behavior During Late Adolescence**

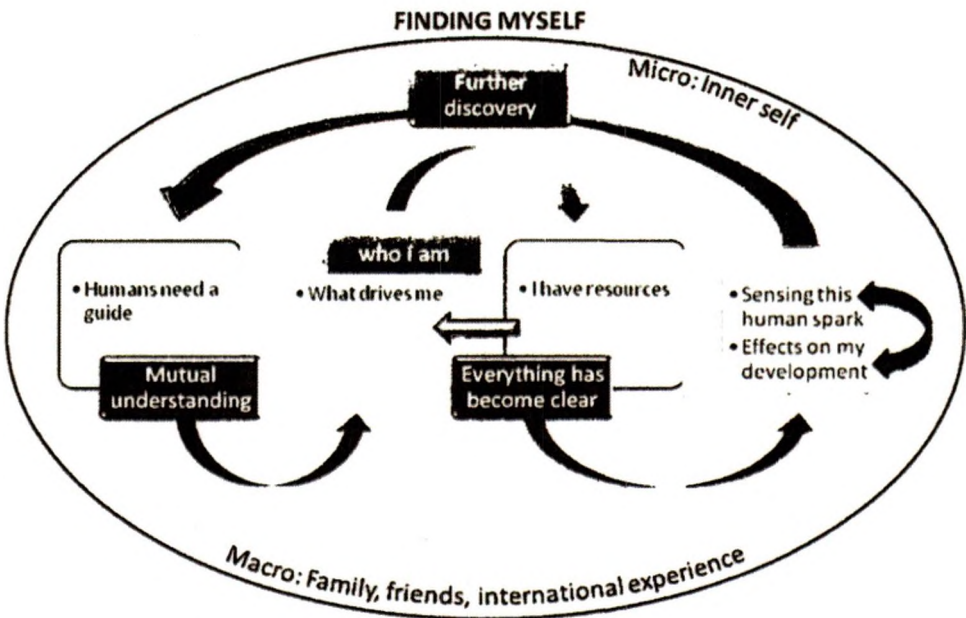


Figure 1. The Theoretical Model for the Core Concept of *Finding Myself*

Overview of the Model

Although visually represented in a planar and linear depiction, the model is a three-dimensional structure. Therefore, the model should be viewed as an egg-like form,

cut in half length-wise to reveal the inner contents floating in context. The explanation of the theoretical model begins with an oval drawing as the border of the model, and then progresses to the concepts it contains within, which is its nucleus. The oval represents the boundaries of the study, which is the phenomenon that the model explains, *finding myself*. The grey area inside the oval represents the contextual conditions, at both the micro- and macro- level, that the core process concepts and process concept links are entrenched within. Embedded in the context are four large white squares. These squares represent the core process concepts. Additionally, there are smaller colorful rectangles within the model. The colored rectangles represent processes the late adolescent must actively engage in to move to the next level of maturation. Although presented as a linear model, this process can be interrupted or delayed at any time. Choice is a large influence in this model, and if the late adolescent does not choose to continue, there will be a delay or stagnation in progressing to the next level (a delay in maturation). The process linked to each step of maturation (each core process concept) is where choice is exposed in the model.

The oval circle drawing the border of the model depicts the limitations of the focus of this study, which was the influence of spirituality on behavior in late adolescence. The oval encircles the processes relevant to the core concept of *finding myself*. *Finding myself* represents the maturation of spirituality and its influence on behavior during late adolescence. In whole, this model describes an embodied experience as the late adolescent moves towards adulthood. This includes building relationships that are strong and permitting the late adolescent to enjoy giving as part of

the relationship. The relationship is simultaneously intrapersonal (having an honest self awareness), interpersonal (person-to-person), and extrapersonal (community/global/greater good) level. This process must be achieved without the late adolescent losing touch with what they have personally defined as their moral values, beliefs, and ideals. *Finding myself* was an *in vivo* code captured from study participants and reflects the continual developmental processes the participants engaged in to bring together their personal spirituality (which includes values and morals) and their behavior (including meaning, beliefs, and practices) during late adolescence.

Embedded and antecedent to *finding myself* are the influential contextual conditions, represented by the grey area inside the oval, at both the micro- and macro-levels. The micro-condition of *inner self* awareness is interwoven with the attitudes, values, and experiences from macro-conditions of *family, friends*, and an *international experience*. Micro-conditions were not separated from macro-conditions to visually represent the embodied nature of the model.

Humans need a guide, presented in the first white box from the left in the center of the model, is a core process concept – a stage of maturation – and represents the causal condition that permits the late adolescent to begin to engage on this journey of *finding myself*. *Humans need a guide* may be a person, institution, religion, or idea/philosophy or there may be more than one. There is choice by the late adolescent in what person, institution, religion, or idea they choose to have guide them; they also have a choice of whether or not they choose a guide at all. A smaller red rectangle is linked to this box and titled *mutual understanding*. *Mutual understanding* represents a process concept link

and illustrates the choice the late adolescent has to engage in a meaningful relationship with the guide, and for the guide to engage in a meaningful relationship with the late adolescent. This relationship is considered by the adolescent to be the perfect environment where both the late adolescent's and the guide's needs are accounted for. An inherent understanding exists between the participants that both are committed to the relationship and a freedom exists to enter or leave. If either the late adolescent or the guide is not committed to the relationship, the process stalls until a relationship with *mutual understanding* is present.

When the late adolescent and the guide(s) have a relationship with *mutual understanding*, the interaction that takes place allows the late adolescent to move to the next level of maturation (the second white square from the left). This second core process concept is titled *what drives me*. *What drives me* is an umbrella of action/interaction strategies the late adolescents engage in as they mature into *finding myself*, the core concept. *What drives me* includes motivations of the late adolescent at a particular time, usually situation-based, and reflects past experiences and present desires. This includes their active ability to build relationships with a public display of the private self that is usually only shared with close friends or family; it also includes active modeling of behaviors learned from the guide they have chosen.

A small green rectangle linked to this square is titled *evolution of who I am*. *Evolution of who I am* is a process concept link and represents a growing awareness of the general evolution and gradual development taking place within an individual. The late adolescent is aware they remain the same person over time, but with modifications

related to experiences taking place. The “core” of the late adolescent remains a stable part of who they are. It is a choice of the late adolescent to become aware of these changes. They may choose to become aware and personally recognize their evolution, cling to past perceptions they had of themselves, or use other people’s perceptions of who they are. If the late adolescent does not choose to become aware and personally recognize their evolution, he or she will delay the process of maturation.

The third white square from the left represents a third core process concept and is titled, *I have resources*, and represents “intervening conditions.” Intervening conditions influence the action/interaction strategies. Therefore, there is an arrow between the concept *what drives me* (the action/interaction strategies) and *I have resources* (the intervening conditions) to show the influence of the intervening conditions on the action/interaction strategies. *I have resources* represents the late adolescent’s internal control to tap into their personal spirituality, called *my core*. Their unique value systems and beliefs are accessible to them in a natural and embodied way; they know how to access them in a matter correct for themselves. These resources allow them to recognize whether the path they are on at a particular moment is attainable, maintainable, and desirable for them. A sense of contentment comes from their ability to tap into this resource and to know that decisions they are making will remain positive for them in the future.

Everything has become clear is a process concept link. A small purple rectangle representing *Everything has become clear* on the model is linked to *I have resources*, and also touches on the core process concept, *what drives me*, the action/interaction strategy.

Everything has become clear is the process concept link that represents the choice of the late adolescent to be actively aware of wanting to move beyond peer pressure and be decisive using internal values and measures as a locus of control. This awareness includes a desire to learn and try to change in ways that permit the adolescent to carry their ideals into daily activities. Failure to actively become aware of the need to make decisions based on internal values rather than external forces delays the late adolescent from progressing.

The final white square of the model contains two concepts, *sensing this human spark* and *effects on my development*. These core process concepts are closely related as they occur as a simultaneous experience, but are presented separately for the purposes of this paper; a blue curved double arrow to their right represents their close interrelationship. Together, they represent the consequences of the previous processes. At this stage of maturity, it becomes clear to late adolescents that the activities they engage in give them opportunities to move forward in their desired life directions. Goals, whether personal or achievement focused, are evaluated clearly for successful attainment. As a whole, adolescents are aware of their ability to define who they are, define long term goals, relate to other people, and perceive intangibles such as love, hate, passion, frustration, and anger in others. An increased security develops as late adolescents understand where they fit in their communities, and the larger world. They begin to seek ways to engage in these areas in ways they view positively (i.e. volunteer work). Additionally, despite outcomes of events, late adolescents perceive the stability of their “core” that permits them to bear difficulties and meet challenges without destroying who

they are, their “core.” So while resisting the urge to reduce, *sensing this human spark* is the essence of this process and *effects on my development* represents the developmental change. More concretely, *sensing this human spark* represents the late adolescent’s ability to capture the significance of the developmental change, represented by the concept *effects on my development*, and place importance on that developmental change as well as evaluate the relevance of the developmental change. However, the adolescent experiences these concepts in an embodied nature and does not distinguish them as separate or unique processes.

Further discovery is illustrated by the blue rectangle and blue arrow above the four white squares linking the end core process concept back to the beginning core process concept. *Further discovery* is a process concept link, representing the iterative nature of the theoretical model and how the journey of *finding myself* may repeat itself over and over during late adolescent development. For example, a choice is made by a late adolescent to engage in an intrapersonal process of increasing awareness that actions the teen is engaging in are naturally modifying who that individual is. This process involves a person searching for examples within his or her life and seeing this maturation taking place, and furthermore, working to understand how these examples are creating change within him/herself. From this reflective searching, the late adolescent identifies other areas where maturation can continue, which propels them to seek a guide, which may be the same or different as earlier guides, and to continue their journey. In this manner, the cycle is repeated (growth or maturing is cyclical in nature) as the end of one phase links to the beginning of the next until development through late adolescence is

complete. In this way, *further discovery* represents the passage of how younger late adolescents, 16 years of age, progress through the maturation process to an older late adolescent period, 21 years of age. At the end of late adolescence, and through the process of *finding myself*, *further discovery* prepares the late adolescent to move into young adulthood. If the late adolescent chooses not to search for examples displaying maturity or to evaluate his or her developmental and maturational change in a manner reflective of their personal spirituality, *my core*, the late adolescent can delay or stall the process and remain in late adolescence.

In total, this process, embedded in the contextual conditions of the adolescent's surrounding environment, moves late adolescents towards *finding myself*, with a firmly self-defined identity and ability to engage in relationships on an intrapersonal, interpersonal, and extrapersonal level from an embodied experience as they enter early adulthood.

Theoretical Model – Data Analysis Summary

The theoretical model was derived from the study's axial model. Theoretical categories explain relationships between themes and their properties. *In vivo* terms were captured from the participants' words during data analysis. Use of *in vivo* terms kept data analysis close to participant data and led to the discovery of the maturation of spirituality and its influence on behavior during late adolescence. *Finding myself* was the overall description of the process of being influenced by spirituality and spirituality's influence on behavior. Symbolic Interactionism (Blumer, 1969) informed the study.

Diagrammatic Presentation of the Model

A diagrammatic presentation of the model depicts, in words, the organization of core concepts, sub-concepts, and linking process concepts. It is used to reveal the underlying structures to a theoretical model. The complete diagrammatic presentation of the theoretical model devised in this study is presented in Table 6. Later, as the model is discussed in depth, with supportive quotes, components of the complete diagrammatic model will be presented to assist in visualizing the structure of the model while examining supportive data.

Table 6. Diagrammatic Presentation of the Theoretical Model.

Core Concept –	<i>Finding myself</i>	
Sub-Concept –	<i>The real me</i>	
Contextual Conditions	Micro-conditions: <i>Inner self</i> Macro-conditions: <i>Family, Friends,</i> <i>International Experience</i>	
Core Process Concept –	<i>Humans need a guide</i>	Process Concept Link
Causal Conditions		<i>Mutual understanding</i>
Dimensions –	Persons Institutions Religions or Philosophy	

Table 6 cont.

Core Process Concept – Action/Interaction Strategies Sub-Concepts –	<i>What drives me</i> <i>Build relationships</i> <i>Model my behavior</i>	Process Concept Link <i>Evolution of who I am</i>
Core Process Concept – Intervening Conditions (Interacting with What Drives Me) Sub-Concepts –	<i>I have resources</i> <i>My core</i> <i>Something guides me</i>	Process Concept Link <i>Everything has become Clear</i>
Core Process Concepts – Consequences Sub-Concept –	<i>Sensing this human spark</i> <i>And</i> <i>Effects on my development</i> <i>(embodied together)</i> <i>Control of myself</i>	Process Concept Link <i>Further discovery</i>

Core Concept: Finding Myself

During data analysis, *Finding myself* emerged as the core concept in this study and is presented in Table 7. A core concept or phenomenon is defined by Corbin and Strauss (2008) as, "...the main theme of the research. It is the concept that all other concepts will be related to" (p. 104).

Table 7. Core Concept: Finding Myself

Core Concept – Sub-Concept –	<i>Finding myself</i> <i>The real me</i>
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All participants in the study were aware of an endeavor to find themselves as late adolescents and emerging adults.

Participants discussed different levels of awareness of *finding myself* depending on their age and maturation. Younger participants generally discussed their development in terms of controlling external behaviors, and older participants discussed their development in terms of internal behaviors and modifications of previous ideas. A sub-category emerged as an attribute of *finding myself*. This category was *the real me*. During the process of *finding myself* the adolescent moved closer to matching what they described as *the real me* with the public self.

Sub-Concept: The Real Me.

The real me exemplified a private self that adolescents displayed publicly at varying levels of confidence. *The real me* was a private description of what kind of person the participant believed he or she was and was only disclosed to the participant and close and trusted family and friends. *The real me* may be in contrast to the public self. When discussing *the real me*, participants acknowledged the privacy they held for this side of themselves. One participant wrote:

I am very insecure, I want people to like me, and as I am quite shy, instead of impressing the other person with my personality, I normally rely on my appearance. And I know this is not good. With people I do know, I don't need to rely on physical appearance because they already know the real me and with the confidence we have, I don't mind being crazy or laughing at anything or being ridicule with them. When I am with my friends I am a happy person and quite

talkative and nice but with other people, especially boys, I don't know how to be me.

Another participant shared:

I try to be as genuine as possible, but I tend to mask any dislike I may have for others by being polite and civil with them. I am not easily distracted and I do judge people for their deeds and words.

One participant explained, "That seems to be the hardest part, letting others know how I feel." While discussing their public persona, one participant revealed, "Sometimes it is difficult for me to be kind with people that I don't get along with. Goodwill would come with this because I don't always have the disposition to help others." A different participant wrote:

I lack the ability to take care of myself and do what I want to do, say what I want to say because I am so concerned with making other [sic] around me happy..because I want them to think I am a kind person.

Another shared...

I think at first people think of me as a quiet person, because I feel like my attitude/personality is something that could be eased into. It's a part of getting to know me. I am a very loud person, but I try to be respectful. I love sarcasm, I think it is probably the best thing on this planet. At the same, I think I am [a] very caring person and I try to show that. My friends tell me that my personality is something that is very deceptive before you get to know me. I realize that certain

personalities just don't quite get a long no matter how much you may try and I notice that in my interactions with people and the way people respond to me. Other participants discussed the context in which they would reveal *the real me*. The message of one participant explained...

I tend to be a very confident and decisive person only when a situation demands it. If I'm alone or in a very small group of people, I will absolutely take charge. I do this in my closer circles of friends and even in small groups of strangers. On the other hand, I won't really put my foot forward if I'm in a group of many people, particularly when there are others present who are louder, more extroverted, et cetera than I am. I suppose confidence is important in both situations, but I really wish I would be more decisive in larger groups.

Summary

Collectively, study participants were able to distinguish behaviors that were their public self and beliefs and behaviors that were *the real me*, as well as the contrast, comfort, or discomfort between those selves. Participants shared their desire to bring *the real me* close to their public self and have a unified experience.

Literature Support and Relation to Embodiment

The late adolescent experience can be explained by what Fowler (1981) described as "mutual interpersonal perspective taking" (p. 74). What Fowler described with this term was the ability of adolescents to see different "selves" when they were around different groups, such as parents, teachers, peers, church members, strangers, and acquaintances. Each of these "selves" had a distortion when compared to the others. It

was the adolescent's responsibility to consolidate and remodel the multiple selves into a coherent unified self during adolescence. This is the task of identity formation (Erikson, 1963). Not present in the literature was a description of the meaning this process has to the adolescent or how this process reveals itself in the adolescent.

The importance of action also is relevant in the choosing between *the real me* and the public self as a process of *finding myself*. Of all the available options present from which the late adolescent can choose their behavior, it is only after they have chosen their behavior that their choice is actually made. Sartre (2007/1947) explained this phenomenon as follows.

Man is, before all else, something that projects itself into a future, and is conscious of doing so.... Prior to that projection of the self, nothing exists, not even in divine intelligence, and man shall attain existence only when he is what he projects himself to be – not what he would like to be. What we usually understand by “will” is a conscious decision that most of us take after we have made ourselves what we are. I may want to join a party, write a book, or get married – but all of that is only a manifestation of an earlier or more spontaneous choice than what is known as “will.” (p. 23)

Bringing this premise back to the population under study, the late adolescent, by both their awareness and desire to show either *the real me* or the public self, chooses who they are. In one particular time and moment, a choice is made showing an action. Over time, the repetition of choosing one action repeatedly over another solidifies the behavior. In this way, the premise of Sartre informs Fowler's position of reconciling multiple

selves; the reconciliation occurs by continued choice to engage in specific actions. After a time, the repetition forms a consistent, stable display.

Contextual Conditions

Contexts (or contextual conditions), as described by Corbin and Strauss (2008), consist of structural conditions, both micro- and macro-, that form a situation, circumstance, or problem for an individual to which the individual must respond. To understand a phenomenon of interest, the context in which it exists must be examined (Glaser & Strauss, 1967). Micro- and macro- contextual conditions affecting the phenomenon of this study, in other words, the contextual conditions affecting the core concept of *finding myself*, are presented in Table 8. Concepts that emerged when examining data on environment were *inner self*, *family*, *friends*, and *international experience*.

Table 8. Contextual Conditions.

Contextual Conditions –	<p>Micro-conditions: <i>Inner self</i></p> <p>Macro-conditions: <i>Family, Friends,</i> <i>International experience</i></p>
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Micro-Conditions

Strauss and Corbin (1998) use the term micro-conditions to describe contextual elements that are “narrow in scope and possible impact” (p. 181). From this definition, the researcher limited the micro-contextual condition at the level of the participant.

Inner self. Throughout the interviews, participants were consistently aware of changes taking place inside themselves and their interpretations of those changes. Participants used different ways to convey or describe the different types of intrapersonal relationships they had with themselves. The issue of “self-awareness” (having more or less of it) was the measurement most participants used to express change. One participant clearly explained what it was like to be self-aware. “A self-aware person is one who is entirely conscious of his true feelings, desires, fears, et cetera at any given moment. To this end, self reflection and self-evaluation are essential.” This same participant went on to add, “...two things I don’t do nearly enough.” Certain participants discussed how they got in touch with their *inner self*,

Throughout the formation of the equilibrium, yes, I do feel like I matured. I feel like I was able to catch a hold of my emotions and can control them rather well now. I feel older in a sense after, I feel like I have experienced enough in my life that I can concretely feel one way or another about a topic. To reiterate, I feel that I don’t have a lot of confusing emotions cluttering my head, especially during the semester when I was meditating. Now that i have stopped, I feel like I don’t exert the same effort I was when I was meditating, but still have held onto that control I mention.

Other participants expressed their current understanding of their *inner self* during the interview, “I think for many many aspects in my life, I do have a clear awareness of who I am. But there are still times when I question myself and feel that I need to learn more about myself.” Another participant explained,

I live everyday trying to make the most of my individual human connections. I think that being accepting and nonjudgmental of other people, trying to relate to them, and really connect is a way of living spirituality.... I think that's the only way to live a fulfilled life.

A number of participants discussed their *inner self* and how engaging in certain activities helped them better know that *inner self*. "I still don't exactly know what I want to do with my life, and one of the reasons I studied abroad was to see and try new things." Or another participant shared:

More than anything, I wish I were a more self-aware person. That is one quality I feel I lack. I have a fantastic sense of other people – their emotions, their priorities, their desires – but I don't think that skill extends so well to myself, for whatever reason.

This same participant shared later in the interview:

Well, I think my desire to be more self-aware has increased during the past few years. In fact, I don't think I seriously considered such matters until one or two years ago. IN that sense, I suppose that my desire to be more self-aware has grown during the past couple of years and that I'm fully aware of that change. I've begun to realize that self-awareness is a very essential part of a fulfilling life – how depressing would it be to realize, on your deathbed, that you don't actually know who you are? Of course, a desire to be more self-aware would seem to indicate, in and of itself, a great deal of self-awareness already. The problem is I want to be more self-aware.

A few participants discussed their awareness of their *inner self* through external actions. One participant summarized his thoughts with a quote from the movie, *Batman*, “Its not what is underneath, its what you do that defines you.” This participant went on to qualify why self-awareness of the *inner self* is important, “I’d rather choose to be aware of those parts of me that may disappoint or surprise me. After all, I only have to answer to one person at the end of my life – myself.”

Although discussing an abstract concept of the *inner self*, there was firm expression by participants about knowing the *inner self* through this process of self-awareness. The discussion extended beyond participant expression of self-awareness to include their measurement, evaluation, and continued engagement with this abstract concept. This embodied ability to both know, embrace, and prepare for modification provided the background in which these late adolescents became aware of their maturation.

Macro-Conditions

Macro-conditions are defined as conditions, “which are broad in scope and possible impact” (Strauss & Corbin, 1998, p. 181). Family, friends, and international experiences were identified as overall conditions affecting the maturation of adolescents as well as influencing their behavior.

Family. Some participants discussed the relationship they had with their families, “My family is a source of comfort and strength for me.” “I am very close with my family, and when I’m away at college I talk to my parents and brother almost everyday...” “I think my family embodies many of the values I aspire to and have mentioned. It truly is

a loving and caring family and I'm often surprised as to how close I am to my parents than others."

Certain participants described a difficult situation with their family, "However life with my parents is not that easy." Or more concretely, "I lost both of my parents....I have a significantly older sister, but she and I had been estranged for several years by that point, I also didn't trust her before and I trusted her even less afterwards."

Some participants described how family members are role models, "I get my patience and desire to nurture others from my mother, as you have guessed. My dad has driven my independence, and given me the motivation to work really hard to emulate all that he is done."

Other participants described how they have similar beliefs to their family, "Spirituality for both of us [the participant and their father], I feel, is constantly wanting to understand the world and learn more." "I learned from him [the father] though to be very observant, which is a trait that I like about myself." Some participants shared how they measured their choices by what they believed their family would approve,

I don't think my parents would appreciate it if I came home after not seeing them for months, and suddenly wanted to shave my head, join the Peace Corps, and wear only tie-dyed shirts and sandals for the rest of my life.

Friends. Friendship was an important experience several participants discussed in relation to having a place to "be myself" and having the ability to explore. "For me, it's not easy to make friends as I have explained but it is really easy to keep good friends

because with them I am myself and they appreciate me as I am.” Another participant shared:

He [the friend] gave me a chance to just be myself and throughout the development of my friendship with him, I actually began to come to terms with some of the things that made it hard being friends with me.... He kind of showed me that there are more people out there that are trustworthy than just the people that I had before, which also pushed me to get to know more people and open myself to different experiences, cultures, ideologies, etc.

Several participants discussed significant friendships and the influence those friendships had on them, “She has a really good concept of who she is and what she calls the ‘health of her spirit,’ which she describes as her relationship with God. It’s really impressive to me how strong her faith is.” “I would say that our discussions have enhanced our friendship because we have really been able to know each other on a very personal level since we discuss issues that I don’t usually talk about with other people.”

International experiences. Almost all (19 out of 21) participants living abroad, or who had lived abroad, made references to the impact international experiences had on their lives. “This semester in Spain has actually been different in that regard because since everything has changed I am adapting and thus focusing more on the present.” “Right now I’m still unsure of what I want my future to look like specifically, but I think I’ve learned a lot this semester [abroad] and still have a lot more to come. It’s been making me think.”

Other participants identified their previous or current international experiences as opportunities for growth and change, “I would love to learn so many more things related to different cultures and ways of thinking and of life, because those have always been things that have caught my eye.” “The more unique situations I’m exposed to, the more information I can gather about myself.” “I still don’t exactly know what i want to do with my life, and one of the reasons I studied abroad was to see and try new things and have new experiences to help me decide.”

Summary of macro-conditions. Family, friends, and international experiences influenced how late adolescents evaluated themselves by providing cultural norms, group values, and behavioral standards to participants in which to compare and contrast themselves. Late adolescents were aware of the comparison and contrasts they experienced and actively engaged in through their *inner self*.

Literature Support and Relation to Embodiment

The integrated context described by participants between the micro-condition of *inner self* and the macro-conditions of *family, friends, and international experience*, demonstrated the inherent interrelation between psychological and physiological behavior and all levels in-between. Merleau-Ponty (1956/1945) described this relationship as two accounts of the same behavior, the first concrete and the second abstract. Blumer (1969) used this interrelationship extensively to describe symbolic interactionism:

Since action is forged by the actor out of what he perceives, interprets, and judges, one would have to see the operating situation as the actor sees it, perceive objects as the actor perceives them, ascertain their meaning in terms of the

meaning they have for the actor, and follow the actor's line of conduct as the actor organizes it – in short, one would have to take the role of the actor and see his world from his standpoint. (pp. 73-74)

Thus, for participants the micro-condition and macro-conditions were entwined as part of the embodied experience they lived. The contextual conditions were both the history and the future for the process of spiritual maturation, the actions reflecting both past and future, with awareness of a completeness in the present moment. Both micro- and macro-conditions deepened and added complexity to an understanding of an embodied experience by framing aspects relevant to the lives of the participants, and as they continued their developmental journey.

Core Process Concept: Humans Need a Guide

All participants were able to identify a person, institution, religion, or philosophical idea that they acknowledged as being a guide for their lives. Causal conditions are “events, incidents, happening that lead to the occurrence or development of a phenomenon” (Strauss & Corbin, 1990, p. 96). In this study, the core process concept that characterizes a causal condition was the concept, *humans need a guide*. Causal conditions that supported the core process concept of *humans need a guide* are presented in Table 9.

Table 9. Core Process Concept, *Humans Need a Guide* – Causal Conditions.

Core Process Concept –	<i>Humans need a guide</i>	Process Concept Link
Causal Conditions		<i>Mutual understanding</i>
Dimensions –	Persons Institutions Religions or Philosophy	

Participants were able to give examples of characteristics in themselves that mirrored the characteristics of their guide(s). Many viewed family members as their guide(s). One participant wrote, “I model my behavior after my Dad, because he handles situations well and believe that there is ‘a formula for everything.’” Another participant explained why having a guide is a good choice for them.

I have had role models (my brothers, and my father of course) which I have been able to watch to see how they grow and develop. Naturally I would follow some of the characteristics that would end up benefiting them and avoid those that were detrimental.

Older participants shared changes they had made in their lives stemming from their guides.

I have a strong work ethic, not only in academics but with all my activities. I try to get the most out of life by experiencing everything I can (I take classes that interest me, not just for my major or to get an easy A, while in Spain I make sure I plan to visit a new neighborhood twice a week and try either a new food or a new museum, etc.) But I also believe that my father's attitude towards academics is the

same with his relationship, in that he has taught me that I can't give up on people when I'm upset with them, when people move, when childhood friends have changed as they've gone to college.

Similarly, another participant described:

I think that as you start growing up, most of your time is spent with your family and at least for myself, I always listened to what my mother said. When she told me to be polite I was, and I think I learned how to talk with other people from doing so with my family.

One participant shared his guide in life came from books.

Good always prevailed over evil in a very epic and Romantic fashion. I've always tried to carry those ideals with me...I guess I'd like to learn how to be more like the archetypal hero of most Romantic stories – confident, self-aware, and decisive.

Other participants noted institutions as their guide(s).

Within the schools there are teachers and faculty who can reward/punish students based on their behavior. I think that you can look at the collective unconscious as a sort of internal compass. If you think of the idea that everyone universally shares emotions and feelings that have been passed down through generations, and I think that these archetypes we inherit could contain the very basic principles of what is right and wrong.

Some participants discussed religion as their guides.

I do put a heavy emphasis [on] the Holy Spirit in my faith. To me its something very personal and special, to put it into more modern and pop-cultural terms, its kinda like “the force” for me. But that’s not to say I go around trying to levitate and move things with unseen forces, I think I’d loose [*sic*] a LOT of friends that way, but I do believe its something very real, something I can grow closer to and something that will make me stronger. If there is anything I’d like to learn within my faith its how to become closer to the Holy Spirit within me, communicate with it, develop it, make it a bigger part of me. That and I should read the Bible more. There’s a lot in that book that I feel is important to my faith (naturally, it being my faith’s Holy Book) and I can benefit from it tremendously. And all of this I want to learn simply because it goes towards a better me.

Process Concept Link: Mutual Understanding

Participants expressed their choice to engage in a meaningful relationship with their guides, “My relationship with each member in my family grows more mature as I grow up and experience more serious life problems. Each time they help me through, my relationship grows stronger.” Another participant shared:

I am aware of this in my social interactions...I find this especially true with friends and family because it is easier to gauge in my social interactions with people. This has generally been true overall since childhood, however I definitely see it becoming more apparent as I grow older and become involved in more relationships with people.

Other participants discussed the need of their guides to engage in a meaningful relationship with the late adolescent. One participant talked about his community,

In a collective sense, it really depends on the atmosphere in which the group is in. For example, I am from a very small town that has a strong sense of community, helping out anyone in need. It is not a bad place what so ever and most people coming from my little public school have a good future in front of them. I believe all the members of this group can look to each other for this idea of a role model as well as the adult members of the town whom are very well intertwined.

A different participant discussed her father.

As a child my father worked full time and we only really bonded over the tv at night or during the weekends when he wasn't travelling, but usually he was always home on Sundays and would drive me to Hebrew school. He would always play opera or jazz in the car on the way and it was something we bonded over (we saw the Sweeney Todd movie premier because it had been an opera we listened to). We also both love running; he has ran 2 marathons and I've been training for my first.

A few participants expressed their hesitancy to engage in relationships.

People are very surprisingly and I feel ultimately good, if given the opportunity whereas I feel I have always put my guard up when I met someone, I think a better approach is to be cautious but still accepting and warm.

And ...

The hardest part wasn't moving on without my parents or coming to terms with my situation, that was in a way the easy part. The hard part was reconnecting with people, because it was scary. Before, I was never known to be very emotionally aware/sensitive to others. But afterwards I was just even more closed off and scared. Its hard to start over on your own, especially when the two most important people aren't there anymore. I loved my parents very much.

Another participant expressed:

As i am independent, i don't rely much on them and they get angry because of that.... they say that i only love them because of the money and not because they are my parents and i don't know why or how they concluded that. The fact that i don't rely much on them, because i live in my own world, and that i'm not an i-love-you person does not mean that i don't love them.

Finally, a few participants discussed the outcomes when guides were not available or used.

Seeking guidance on trying to live a 'good life.' Well I believe that I learned my morals/values through my parents, both whom have their own moral/values rooted in Christianity. If you look at children raised with a lack of parenting (or parental figures), it can have a drastic effect on their personality and behavior.

Summary

The core process concept of *humans need a guide* emerged from the data. The guides identified by participants included: people, institutions, philosophies, and religion.

The process concept link tying *humans need a guide* to the next stage of maturity was *mutual understanding*. *Mutual understanding* refers to the choice of late adolescents to engage in meaningful relationships with their guide(s) and to have their guides reciprocate that choice by choosing to have meaningful relationships with the late adolescents.

Literature Support and Relation to Embodiment

Previous research on social support concluded the “simplest and most powerful indicator of social support appears to be the presence of an intimate and confiding relationship” (Lin & Peek, 1999, p. 243). The results of this social support cited in the literature include increased psychological and physical well-being related to reduced effects of stress (Hussong, 2000; Turner-Musa & Lipscomb, 2007) and have an inverse association with depression (Newman et al., 2007). More directly related to behavior, Zimmerman and Hurd (2010) found African American adolescents who had a mentor had less sexual behavior over time when compared to adolescents who did not have mentors. Not presented in the literature is what influences late adolescent ability or affinity to engage in intimate and confiding relationships.

A possible explanation of what influences a late adolescent’s ability or affinity to engage in an intimate or confiding relationship may be related to the relationship they have with themselves. The late adolescents were very clear in describing why they found their guide a positive addition in their lives. It was something they viewed as benefiting them. Through an embodied perspective, the adolescent’s reality stems from their relationship with themselves and the external world; therefore, they view traits,

characteristics, habits, values, or attitudes in others simultaneously while experiencing them. Heidegger (1926/1962) explains this as a contrast to Cartesian dualism, “‘I am’ in the possibility of Being towards various ways of comporting myself – namely, cogitations – as ways of Being alongside entities within-the-world” (p. 254). In this way, individuals are linked collectively with their environment in formation of their experiences (Merleau-Ponty, 1956/1945). Therefore, the individual person, including the late adolescent, becomes intimately linked with time and boundless connection with others. To be so invites the actions of others into the lives of late adolescents and the actions of late adolescents into the lives of others. The late adolescent may identify those persons who bring experiences of a significant nature, either positive or negative, clearly into their awareness. From this awareness, they become more or less responsive to these people. Therefore, the adolescent plays a vital role in their personal evaluation of what may be of benefit or liability from engaging actively with a guide. It is only through a shared experience that the adolescent sees the self.

Core Process Concept: What Drives Me

The researcher identified the core process concept, *what drives me*, as an action/interaction strategy used by participants. *What drives me*, and its associated components, are presented in Table 10.

Table 10. Core Process Concept, *What Drives Me* – Action/Interaction Strategies.

Core Process Concept –	<i>What drives me</i>	Process Concept Link
Action/Interaction Strategies		<i>Evolution of who I am</i>
Sub-Concepts –	<i>Build relationships</i> <i>Model my behavior</i>	

Action/interaction strategies are “devised to manage, handle, carry out, respond to a phenomenon under a perceived set of conditions” (Strauss & Corbin, 1990, p. 97). The core process concept, *what drives me*, consisted of personally identifiable behaviors used by participants to elaborate on the changes they were experiencing as they related to their guides. Two sub-concepts emerged from the data within the core process concept of *what drives me*. They were *build relationships* and *model my behavior*. These sub-concepts were heavily influenced by contextual conditions, including morals, values, and/or personality characteristics.

When engaging in actions, a late adolescent will evaluate his or her current situation, past experiences, and present desires. From these sources, the late adolescent models behavior he or she has chosen as appropriate for the image he or she wants to portray.

Some participants explained that what motivates them are their values or morals. “Honestly, I don’t see us staying together for the long run. I think our values are a bit too different.” Another participant shared, “I do appreciate old fashion and traditional values.” Other participants noted a personality trait that motivated them in their actions. “I am independent, strong-willed, and i nearly always achieve what I propose [for]

myself.” “My hard work is mostly directed to school and in the summers my waitressing job.” Among the participants, there was great similarity in responses.

Sub-Concept: Build Relationships

One action/interaction strategy that emerged from the data was *build relationships*. *Build relationships* focused on creating and maintaining relationships that had value for both the participant and the other member(s). Participants discussed their active behaviors to create relationships with individuals and groups, which may have included building a relationship with a greater good or Higher Power. Related to interpersonal relationships, one participant described her ability to get along with others, “I like to be around people and I learn to like them very quickly.”

Other participants discussed building relationships with a greater good or Higher Power. A participant wrote...

Spirituality for both of us, I feel, is constantly wanting to understand the world and learn more. It is finding a way to live that provides inner comfort, that just feels right. Its believing in something ‘out there’ even if you’re unsure of what that is.

Other participants were more concrete in their examples of building meaningful relationships. “By being a good friend, I think I show my friends how I want them to be with me.” ... Or ... “What I mean is that I I want to love, and be loved as well. If you’re always there for a friend, she’s going to be there for you as well.” Another participant shared their experience from engaging in building relationships. “He kind of showed me

that there are more people out there that are trustworthy than just the people I had before.”

Other participants described moving away from relationships that weren't meaningful to them. One participant wrote:

Joining a sorority was definitely hard because as much as I wanted the social aspect of living in the house I hated the social aspect of partying. At first the boys were the ones who gave me the most trouble and constantly pressured me to drink. Sometimes the girls would, especially during pledging, but eventually everyone either accepted it or gave up. Now people will still say “Come on” or “Pleaseeeeee” (for a while and generally from the girls) but after I say no enough, they give up.

Another participant shared:

I have realized this semester that it's incredibly difficult to find more than a handful of truly good friends who value you as much as you value them. I have so many friends with whom I love to spend time and tell stories or jokes, but I can only count on three of four of them to actually listen to me when I speak, to recognize my hopes and fears, and to take care of me if I am ever in need.

Some participants shared about building relationships in their community.

I think I am these things because I am active in my community. When people typically younger kids see me, they see someone that is involved and that enjoys giving to their community....I love to give my time to others just to meet people but also to give back. If someone needs help, why not help them?

Other participants shared some uncertainty in their behaviors of building relationships.

Is it possible at all to learn to do things for others without expecting recognition. I usually look for recognition. I know that a person with true character does things without a reward. I don't want rewards, I guess just to be appreciated is nice.

Or ...

I share the caretaker characteristic because I am always wanting to look after my family and friends and sometimes to the point where I stop taking care of myself as well... We are always worrying about our loved ones and their safety and happiness. Sometimes to an irrational point.

The behavior of *build relationships* was shared with meaning and purpose from the participants. Varying levels of engagement were discussed and different levels of success expressed.

Sub-Concept: Model My Behavior

When participants discussed *model my behavior*, they discussed conforming their behavior to a standard or standards they wished to exemplify. These standards may have included interpersonal modeling or extrapersonal modeling. Some participants wrote about using religious guidelines for behavior modeling. One participant wrote:

The universal tenet that I see is treating humans with respect because we are all people. The reason for the differences is that people want an identity, and the origins of the faiths show how people want to [be] unique and original. I see the differences in the way people fraternize with people of the same religion, because it means the same ethics.

Another participant wrote along the same theme.

...religion acts as a moral grounds for which I base my decisions. Other religions have different standards of ethics, so they are different from mine and I think this is more defining of an individual. I accept and respect all other religions, but I have beliefs that I stick to and truly believe in.

Other participants discussed wanting to model behavior of their parent or significant adult.

I am willing to put a lot of effort to continue the legacy of my family, to pass on all that I had to my kids. Note that my motivation isn't forced, I don't feel like I have to live up to my brothers or my father all of whom have done great things. My motivation is natural, as if it was just ingrained into me and I think it is the same way with my brothers.

A different participant wrote:

Watching my father go to Torah study has started an interest in learning more about the Torah, but I also want to further understand other religions as well. I think watching his desire to learn has always been inspiring for me and has made me want to reach academic heights. Both my father and I don't believe every story in the Torah, but my analyzing the meanings behind the stories is more important for us and for understanding what Jews feel are the important ways to live their lives.

Another participant explained:

Because there have been so many people in my life who have supported me, I've learned to give of myself, not just financially but giving of my time and self as a person, because sometimes people just need someone to be there.

Other participants wrote about how they were just beginning to recognize their choices in modeling behavior.

I think my parents played the biggest role in teaching me to engage in life that way. We never sat down and talked about anything like this specifically, but just through their support of me and my engagement in everything I've done has allowed me to partially discover some of these things on my own. I think I only just started in trying to engage in life this way just recently when I started studying abroad.

In all cases, participants were able to describe their personal desire to conform their behaviors to a set of rules or examples. The participants were able to describe why modeling the behaviors was desired or helpful and what meaning those behaviors had for them.

Process Concept Link: Evolution of Who I Am

Participant awareness regarding building relationships and modeling behavior was intertwined with their values, morals, and personality characteristics. Action/interaction strategies a late adolescent engaged in permitted the adolescent to notice and understand the reality of his or her evolution, which included a stable core that evolves over time as

new experiences are lived. Some participants described the consistency of the self that persists while other parts evolved.

I don't think any situation in particular will be affected by the developments I'm going through. I've always thought of it more as a general evolution of who I am simply through my experiences, which will have an effect on the smaller things I do in life rather than any drastic changes in character.

Or ...

I still don't think I know who I am completely, or perhaps I will never know because I think people are constantly changing. But at the same time in respect to spirituality, I think a person's core remains the same once it is established.

Other participants discussed their actual evolution.

I guess I can be characterized as having a strong love of life, which includes getting the most of everything I experience. I want to learn everything, see everything, try everything. I think because of this strong pull towards education, growth, etc. the outside of appearance, though still important to me, has less importance.

And ...

I think the Holy Spirit is always constant, but what does change is my relation to it. As I grow it develops as does my awareness for this development. I'm aware of these changes, while I don't think everyone is, I can tell when something has developed within me, or at least I like to think so, however the real question is

more or less HOW it is developing. At my age, this is the thing I can't tell, only affect and hope for the best.

Some participants discussed this awareness of their evolution related to others.

I'm honestly unsure of how this semester's developments are going to affect my relationships with loved ones. Like I said, I will definitely be more outgoing and hopefully a little wiser but I still hope to maintain relationships relatively similar to the way they were before.

And ...

I can see these changes happening in where I see my life going and also through my relationships and how I have learned a lot about myself in my connections to other people. I have been able to see what aspects of myself I never want to lose and also aspects of myself that I want to grow out of for the better.

A few participants shared negative feelings related to this evolution of their core.

I see these things in my [self] whenever I interact with family, friends, and even strangers. I want so badly for people to be happy that I will do whatever I can for them. I sacrifice a lot for people if they need me or need help without blinking. It's in my nature to try and fix something.

One participant clearly stated:

I think I will always be the same person and I like it that way. I can become smarter, wiser, stronger, and more experienced, but at my core I will still always be me. I wouldn't really want to be anybody else, and if my personality were to ever change dramatically it would never be over the course of only one semester,

it would be a very gradual development. 40-year-old Yoda hopefully will be different, with a family, job, and home, but will still generally be the same 20-year-old Yoda I am today.

Summary

For the participants, this awareness of the evolution of who they were did not occur in isolation. Experiences, whether interpersonal or extrapersonal, influenced their increasing intrapersonal awareness of their evolution. *The evolution of who I am* modified participants' values, morals, and personality characteristics and, therefore, their behavior, including meaning, beliefs, and practices.

Literature Support and Relation to Embodiment

The literature has shown that a pre-cursor to adolescent identity formation is linked to their actions to belong and have a social identity (Newman & Newman, 2001). A research study by Tanti (2010) suggested self-perception and group interaction were influenced by the social context in which a person's social identity is constructed. Underlying this perspective is moral concern which is based on specific connections among people (Adler & Clark, 1991).

Erikson (1963) identified the developmental stage of adolescence as involved in the task of defining identity versus role confusion. During this task the adolescent strives to answer the question of who they are, where they fit in society, what they are doing, and where they are going. The answers to these questions are derived from the actions and behaviors the adolescent engages in. As Sartre (2007/1947) proposed, "existence precedes essence" (p. 20) which means that humans can only reflect on who they are after

they have made a choice of action. This action may be a purposeful action or failure to act. The variety of choices available prior to the action are not relevant in this argument as the choice of action, or failure of action, demonstrates what or who the person is through the choice they have made (Sartre). In the case of late adolescent development, the actions of the late adolescent in relation to others, and society, define who they are. Interactions with significant adults allow the late adolescent to explore who they are through various and divergent actions to determine their own identity. However, if the significant adult gives continued negative feedback to the late adolescent or tries to persuade them to conform to the significant adult's views, the late adolescent may face confusion about who they are (Erikson). This is what Erikson called role confusion.

Core Process Concept: I Have Resources

I have resources was the next core process concept identified by the researcher. *I have resources* describes an intervening condition. Intervening conditions are "structural conditions bearing on action/interactional strategies that pertain to a phenomenon. They facilitate or constrain the strategies taken with a specific context" (Strauss & Corbin, 1990, p. 96). *I have resources* captures participants' perspectives that, despite the outcomes of what they may attempt to do or engage in, they will be stable in their development. Participants believed they could meet challenges and bear difficulties. The characteristics of *I have resources* was heavily influenced by both contextual conditions and the causal condition, *humans need a guide*. Also, *I have resources* influenced the action/interaction strategy, *what drives me*. Sub-concepts related to this core process

concept were *my core* and *something guides me*. The core process concept, *I have resources*, and its associated components are presented in Table 11.

Table 11. Core Process Concept, *I Have Resources* – Intervening Conditions.

Core Process Concept – Intervening Conditions (Interacting with What Drives Me)	<i>I have resources</i>	Process Concept Link <i>Everything has become</i> <i>clear</i>
	Sub-Concepts – <i>My core</i> <i>Something guides me</i>	

One participant quoted their use of *I have resources* well.

[I am] a more resilient person because I know I am able to handle problems in life because I have resources (those certain characteristics the help me deal with problems) to help me get through. My family is also a source of comfort and strength for me. I am definitely aware of it changing, especially in terms of my family. My relationship with each member in my family grows more mature as I grow up and experience more serious life problems. Each time they help me through, my relationship grows stronger.

Another participant shared a religious perspective.

Everyday that I wake up as a capable human being, able to live my life and do things that I love, I feel that everything has been directed by a higher power. I feel hopeful because I have amazing friends who genuinely care about me and sometimes that is a little overwhelming. I must admit that expressing that I care about someone else is still hard, so I try to show people instead.

Younger participants shared their resources. “Yes, of course, I always do everything by myself but then after all troubles I speak with my mother about them and we laugh and have good times talking together!” And ...

There are times when I do not feel really comfortable. That happens when my friends talk about things which I disagree with or when they do not really express my opinion and the reason why I think that way. I sometimes feel impotent and uncertain about my convictions. In those situations I just listen and be quiet. But when I think that the conversation is going in the wrong way I do try to change subject or express strongly my point of view! This happens really often but I try to be kind, patient, and smiley.

In both older and younger participants, there was an understanding of what their resources were, their beliefs about those resources, and how they used them. Although the importance of context varied between older and younger participants, the practices taking place within participants’ contexts took the same form.

Sub-Concept: My Core

My core was a sub-concept that emerged from the data when participants were talking about their personal spiritualities. Participants were able to define, describe, and give examples when they accessed *my core*. *My core* was a separate idea, different from the definition participants gave for the generic concept of spirituality. Participants described *my core* as a living part of who they were and were able to identify *my core* in others. Connecting to *my core* allowed participants to know if the actions they were engaging in were right for them. One participant described *my core* ...

I think my “core” comes from the things that have the longest-lasting impact on who I am, like my upbringing, which reflects strongly on me. This is part of my history and cannot be changed. Now that I think about it, I guess you could call it my soul or my spirituality. Whatever name you give it, I would define it as part of me that generally stays the same even through many years of life and experience. This isn’t to say I won’t mature or develop as time goes by, but I think a core is a vital part in someone’s identity and it’s what makes someone unique. If everyone could be molded into whatever you want to make them, then everybody would be the same.

Similarly, another participant described his or her core,

I think they do change because as someone grows older they gain much more experience and knowledge which, I think, obviously [*sic*] also change the person, but not completely because there is always someone’s past in its present and no matter how much you gain or even lose there’s always going to be something that stays intact. So I think I’ll change as I grow older but still have something in me that makes me be me no matter what.

And, another participant shared, “I think a person’s core remains the same once it is established.”

Beyond the personal experience, another participant described *my core* in a fellow student.

He was a young Muslim boy from my school in America and I just remember him being fairly devout to the traditions and rules of his faith, and that faith as well as

those rules being a part of his everyday life. While I don't necessarily believe this makes him spiritual, for surely one can practice tradition and never reach any sort of connection with God as well as vice-versa, but to him it was something real and necessary. I felt, to him, his faith was very real and a part of everyday life, more or less THE part of everyday life.

In summary, the participants were aware that *my core* meant they would both, "still always be the same," and yet be flexible enough to be "modified" as they continued to mature.

Sub-Concept: Something Guides Me

Something guides me had the features of an inner motivation that occurred subconsciously or consciously propelling the adolescent along into adulthood. Consistent throughout the study were the participants' expressions that something guided them in their daily lives. Although wide variation existed among participants about what guided their decision-making, the majority of participants stated this guide was an inner drive in knowing what was right to do. One participant explained being guided, "In everyday life when I make decisions I am influenced or perhaps biased by the values my family and faith have instilled in me." Similarly, a participant stated:

As far as the Holy Spirit goes, I like to think when I face an enormous task ahead of me, I tap into it. That's not to say I work miracles with it: If I don't study I can't expect some inner force to help me do perfect on a test, but when I do study and learn everything, or when I take charge of a situation, or even when I exercise, I like to think the Holy Spirit strengthens my will. Sometimes, when I

must make a hard decision and I know going the route that entitles far more work yields more gain, I simply think the Holy Spirit is with me and will get me through it, for better or worse. In these situation [*sic*] I think it makes both my will and perseverance stronger.

In a more secular tone, a participant who was previously related to a religious faith, but now has become agnostic wrote, "I live everyday trying to make the most of my individual human connections. I think that being accepting and nonjudgemental of other people, trying to relate to them, and really connect is a way of living." The similarity in the descriptions of *something guides me* was indicative of the common use of this attribute during late adolescence.

Process Concept Link: Everything Has Become Clear

The process concept link, *everything has become clear*, emerged from the data as analysis progressed. Participants expressed an understanding that activities they engaged in gave them opportunities to move forward in their desired life direction. Goals, whether personal or achievement focused, can be clearly evaluated for successful attainment. This ability to evaluate a goal and activities clearly, gives adolescents choice and clarity in their decisions. They recognize this change in themselves as they continue on their journey to maturity and *everything has become clear*.

An articulate participant wrote:

I realize I am growing more and more independent. I have many of my long term goals set ahead of me in terms of career options and desired family lifestyle and

as I grow older I have noticed a definite maturation in the sense of defining who I am as part of society. Everything has started to become clear.

Another participant expressed:

I think many of my experiences of independence, like going to college or living on my own in New York City one summer also really added to my assuredness in what I want out of life. I think I realized this when my peers started thinking about our futures and how to best prepare for our future and I saw that not everyone had a direction or knew the path to getting what they desired.

A younger participant described her desires for the future, and how she “knows” what things are best for her.

Yes, I want to know more about myself because I do not, you know my parents say that I am still a teenager and I still have many things to learn and to do. But I don't want that, I want to go to university, to live my life by myself just a bit...I wanna meet different people, I want to fall in love with the best boy ever...I want to study and make a family!!! I want to do everything you see.

Other participants discussed some disappointment ...

I used to play as a child. Since then, some cynicism – or realism, as it were – has begun to creep into my life, and I now recognize that evil people can be victorious and that they often get away with a lot of things. I wish the world were different, but so much that I see and hear in the streets or in the newspaper tells me otherwise.

Also well written, a participant summarized their experience.

I think this age (college years) is huge in realizing why you are the way you are and what aspects of yourself do you value and what aspects would you like to change. I think part of this comes from starting to see your parents as peoples and not just parents. I have begun to see the parts of my parents and grandparents that I am so grateful to have and other parts that I would like to work on for myself. I have always been a very self aware person, almost to a fault! I am so aware of how I am that I can definitely see me changing as I get older. I can see these changes happening in where I see my life going and also through my relationships and how I have learned a lot about myself in my connections to other people. I have been able to see what aspects of myself I never want to lose and also aspects of myself that I want to grow out of for the better.

Participants were able to identify new ways they were interacting with people and communities around them as they grew older and matured, as well as what influence those activities had on shaping who they were. They expressed their personal desires in relation to these changes.

Summary

The core process concept, *I have resources*, and the process concept link, *everything has become clear*, are intervening conditions which reinforce the late adolescent's desire to make choices and feel confident that those choices are in-line with their desires for future goals and dreams. Intervening conditions are in constant interplay with the action/interaction strategies of *what drives me* and the process concept link of

evolution of who I am. Together, through the interrelation of the action/interaction strategies and the intervening conditions, late adolescents can be aware of the ideals they want to support in daily life.

Literature Support and Relation to Embodiment

Western culture imposes significant changes on populations as they transition through the social structure of their environment. For late adolescents, one major area of transition is from secondary education to university or work (Tanti et al., 2010). At the university level or in a work environment, the greater scope of social situations and possibilities of new social members and roles create diversity in an adolescent's expectations and responsibilities. This can highlight differences between the self and others, as well as impact the social identity (Sani & Bennet, 2004). The acquisition of formal operations in late adolescence allows adolescents the capacity to be flexible in interpreting the world through their unique social environments (Tanti et al.).

This relates to embodiment because the interrelation of the late adolescent and their environment has no limits or borders. As new environments, such as university or work influence the adolescent, so too, does the adolescent contribute and change that environment. This concept is discussed in detail by Berry (2002) when he writes:

Obviously distinctions can be made between body and soul, one body and other bodies, body and world, etc. But these things that appear to be distinct are nevertheless caught in a network of mutual dependence and influence that is the substantiation of their unity. Body, soul (or mind or spirit), community and world are all susceptible to each other's influence, and they are all conductors of each

other's influence. The body is damaged by the bewilderment of the spirit, and it conducts the influence of that bewilderment into the earth, the earth conducts it into the community and so on.... But this is a network, a spherical network, but which each part is connected to every other part.

This natural interrelation is what propels the late adolescent to engage in and measure his or her role and the associated choices that accompany that role with and against the community, including persons and the greater world (which may include a greater good or Higher Power), and to evaluate the self. At all times there is a flow between the intrapersonal, interpersonal, and extrapersonal levels giving and sending feedback. This interplay is used interactively in the embodied experience of the late adolescent to understand, interpret, and engage in their development and maturation.

Core Process Concepts: Sensing This Human Spark and Effects on My Development

Two concepts, *sensing this human spark* and *effects on my development*, emerged during data analysis as consequences of the maturational process. Contextual conditions, causal conditions, action/interaction strategies, and intervening conditions tend to work together to create consequences in the overall phenomenon of *finding myself*.

Consequences are the “outcomes or results of actions and interactions” (Strauss & Corbin, 1990, p. 97). These two core process concepts embody the completeness of developmental change occurring during late adolescence and its effect occurring simultaneously on all parts of the person, including, but not limited to, emotional, physical, psychological, moral, and spiritual. This stage of maturity is heavily dependent on previous process concept links and the active choice of the late adolescent to move in

this direction. A sub-concept that emerged from the data within the core process concepts of *sensing this human spark* and *effect on my development* was *control of myself*. Core process concepts at this stage of maturity affect a late adolescent's ability to experience the essence of the changes he or she is going through and link that essence of change to developmental change, including his or her personal interpretation of his or her development. Core process concepts characterized by consequences of change are presented in Table 12.

Table 12. Core Process Concepts, Sensing This Human Spark and Effects on My Development – Consequences.

Core Process Concepts – Consequences	<i>Sensing this human spark And Effects on my development (embodied together)</i>	Process Concept Link <i>Further discovery</i>
Sub-Concept –	<i>Control of myself</i>	

Sensing This Human Spark

The theme of *sensing this human spark* emerged from the data. *Sensing this human spark* conveys the participants' experience of the essence of what they were experiencing and the modification of their personal spirituality, identified in this study as *my core*. They felt connected to themselves, their communities, and the larger world, which, for some, included a greater good or Higher Power. *Sensing this human spark* captured the participant experience of perceiving intangibles (such as love, hatred, passion, frustration, and anger) and being united to and within the larger world. One participant articulated this idea well.

To be honest, I feel this connection to a greater whole everyday of my life. I think that we all share a human spark – whether we are aware of it or not. I think that when we related to other people and really connect with one another we can sense this human spark. Maybe it's transient, but I think it's what we live for. Other participants shared, "I would describe myself as loving, emotional, open, and giving. I love to help other people with any and everything. I care about people."

I suppose what describes me most as an individual would have to be my loyalty. I'm aware of it in the way I treat my family and friends. All of them know that if they have a problem or need something they can always come to me and I'll do my best to help them out.

And ...

At home I get the feeling people like to hang around me, I'm a good friend because I can sympathize, be friendly, carry a load, and smile all the while. I remember once, in Girl Scouts loooooong ago the leader came up to me and told me I'm always smiling, and it always helped her day. I think that's it: I'm always pretty happy and easy going, a good nice, personable gal. And I'm aware of this because people tell me, or I notice it in them.

Another participant described *sensing this human spark* as related to his experience of "Standing among thousands of strangers I felt a palpable link to the larger world."

Other participants discussed this theme philosophically or religiously. "We are the only species on earth that can connect in the overt and subtle ways that we are able to." And ...

When it comes to God and the after life I believe in them because there has to be a reason to life and our mission on Earth and I truly believe its something that can not be proved on this planet because I think that something as great as life can't be something simple enough for science to explain. And, last but not least, I also agree with my father that it is up to us to make this a better place and also think it's possible with just a little contribution from everyone.

Participants were able to express their understanding of this essence, *sensing this human spark*, in intrapersonal, interpersonal, and extrapersonal ways. Additionally, the participants were able to share meaning and beliefs related to their understanding.

Effects on My Development

Effects on my development is the late adolescent's personal interpretation of the essence of *sensing this human spark* that captures changes that have occurred in his or her development prior to the moment, in time, the adolescent is presently located in. Participants shared events they had noted as being significant in their lives, events that created change in their development. One participant shared:

With time I was able to digest and understand my emotions more, which also lead into the meditation that we talked about before. In summary, I'd say my individuality had a burst of growth in those last two years of high school and ever since I have been conscious and aware of who I am, what I do, what emotions I feel and so forth. I'm not a person who lets things pass by me really freely, I like to think things over, and because of that reason I believe I am very aware of this independence defined individuality that I speak of.

Another participant shared a family struggle that was later identified as a source of developmental growth.

I'm most like my mother, not just looks wise (everyone says we look identical) but also our brain works the same. When I learn something from a textbook I read and reread the book section by section, I constantly am making flashcards, and for subjects that are more difficult I need explanations give in different ways; all of this is very time consuming. My father used to get really frustrated, and then I would get frustrated that I couldn't just read something and learn it, like he could. I even saw a learning specialist because he thought I wasn't reading right. However my mother learns similarly to the way I do, we are more open to differences in people, and we are more patient. My brother and I are complete opposites, he's more academic naturally; I'm more social naturally.

Another participant spoke of struggling with their development. "I didn't realize it before last year, but when I care about people, I get scared and push them away."

Other participants were cognizant that changes were occurring as they matured out of adolescence and into adulthood. "I think I've matured a lot this semester through all the different things I've seen and experience[d]" and ...

Yeah there is stuff I need to learn, because I feel that as a person I have much to learn and I want to better myself. I'm not sure how or what yet. I kinda find that out when it comes.

And others were not sure how changes would influence their development later on in their lives.

I'm honestly unsure of how this semester's developments are going to affect my relationships with love ones. Like I said I will definitely be more outgoing and hopefully a little wiser but I still hope to maintain relationships that are relatively similar to the way they were before I came to Spain.

In a discussion of changes one participant noted, the participant shared a large change in the way he viewed others,

I believe that everyone is made up of imperfections that define them as individuals. Whether a person is fat, skinny, black or white, rich, poor; these things make people who they are and sometimes these things develop good personality traits and sometimes bad ones. I don't want to caste judgement on someone just based on a general situation. I'd rather judge a person once I get to know them, but not in the sense of disgust/dislike/anger, but more to say I like this person's personality or this person and I don't mesh well together.

Similarly, another participant shared:

When I was a bit younger I used to have a bad temper, a really bad temper. I always got cross with my friends or sisters for anything important and I used to be very rude and insolent. I still have some bad temper but I am now conscious of it and try to control myself from behaving that way especially when I am nervous, stressed or tired. I started to think that I had to improve my behavior with my family and friends when my best friends spoke with me (I was 13-14 years old) and told me that I had to fight against my temper and that they would help me.

And ...

When I think back about my childhood really the only lesson that was over and over again taught to my brother and me was to be kind. My parents believed that being a kind person was the utmost importance. This message absolutely has to do with why I care, worry, and would do anything for my loved ones.

Participants were able to reflect on the intrapersonal changes they had made during the course of their development. Although this occurred with different levels of specificity, all participants were able to note how they had changed due to previous life events.

Sub-Concept: Control of Myself

Control of myself emerged as a sub-concept and was characterized by the feelings and beliefs of late adolescents. All study participants wrote about the level of control they felt in their life and their comfort related to these levels of control. Participants were able to identify and express when and what they had control over. Many participants acknowledged a connection between what guided them and the control they felt in their lives. Some participants shared their positive sense of control over their lives. One participant wrote after describing meditation, "The thing I realized is that I had control, control of my emotions, control of my personality and who I choose to be. Control of myself." Another participant explained:

I notice when I feel that something is definitively right or wrong I access this "it" because at least for important decision, I need to know that every part of my being is confident with my choice. Also I notice that in activities I choose to pursue or

even everyday habits, I do things, and live my life in a manner that I feel comfortable with, not based on anyone else or Jewish laws.

Similarly, another participant shared:

For my life, spirituality adds a sense of direction, honesty, and hope. Meaning that I know I am not perfect, but that helps me in knowing my strengths and weaknesses, what I can do and can't do, physically and mentally.

Other participants discussed feeling a lack of control in their lives. This participant clearly discussed areas where more and less control were perceived:

I don't always know who I am. I think when making any decision you have to know yourselves and what you want or be under the pressure from others. Even if it is just choosing what to drink at starbucks with friends. My friends will skip classes, but I feel anxiety over missing classes. Sometimes I will tell myself I will skip a class because all my friends are doing something, but in the last minute I always go because I would feel too guilty not. Things I have no opinion on, like a movie, I know less of my self because I am unsure of what I want. Choosing outfits in the morning is very difficult because I do want to fit in and appear as 'fashionable.' Also with going out to eat, depending on who I'm with I order based on what they order. This happens less with friends and with my boyfriend, but with people I am just meeting or in some way trying to impress I feel less confident over food choices. I guess, things related to academics, goals, choices of great importance for my overall life, I am very aware. Whereas choices that

others will view in the here and now or ones in which I do not have strong opinion, I am less confident.

Another participant discussed the methods employed for feeling in control.

I do a lot of thinking before I go to bed. I like to make lists a lot; it's calming. So I keep a book by my bed and I'll make lists of my fears or of things I'm thankful for or things I think I'm good at or just really about anything that is weighing on my mind. I think that a lot of people get uncomfortable seeing their deep personal thoughts written down, but for me, I like seeing the lists. I start to ask myself questions about why I feel a certain way and I can either accept the fear as legitimate or reason out why I'm being foolish.

Process Concept Link: Further Discovery

Further discovery emerged in the data as the final process concept link. *Further discovery* captures the awareness and choice of the late adolescent to repeat the previous process in pursuit of continuing development in his or her quest of *finding myself*.

Further discovery links the consequences of the model, or the ending point of the maturing process in adolescence to the beginning point of the maturation process causing the process to start all over again. *Further discovery* influences the maturation process by influencing the adolescent's choice of a guide and re-evaluating the actions needed to continue development. The outcomes influence the repetition of the process and drive further development. Adolescents can choose to terminate development by not looking for *further discovery* and not taking the actions necessary to mature further. One participant explained his value of *further discovery*, "I wouldn't want to change things. I

like exploring who I am, learning my limits and getting to know myself and other people. It's the best part of life for me." Another participant shared:

I think you can't help but be aware of your experiences as you grow and mature, which leads to even further enlightenment into oneself. But sometimes to recognized how far I've come I take time to just reflect and reminisce on the good things, the bad things and everything in between. Every experience is innately apart of you and its hard to pick and choose what you want to acknowledge. I notice the change mostly in the way I interact with people, the way that i approach certain types of situations and just the way I feel when I have to deal with problems or just general everyday occurrences.

A younger participant shared her experience of embracing who they were at that moment, but also how they were consciously working toward further evolution, "I am very happy as I am and I would not like to change anything of me. Nobody is perfect but we have to try to be as better persons as we can." Other participants related their quest for *further discovery* to understand relationships more profoundly, "Love is very empowering and necessary, whether its love of oneself or other people, even other people just loving you. I truly believe that everyone in my life is there for a reason."

Summary

Together the core process concepts of *sensing this human spark* and *effects on my development*, as well as the process concept link, *further discovery*, solidify the level of development of an adolescent at this stage of maturity and propel the adolescent to repeat

the process until the social process of *finding myself* has been achieved. The late adolescent chooses to engage or not to engage in this iterative process.

Literature Support and Relation to Embodiment

Literature on developmental theory mirrors the data. Erikson (1963) viewed developmental tasks as building blocks which further development is dependent upon. Throughout this process an adolescent must embrace developmental changes with a sense of commitment and obligation, which can create an internal struggle from opposing demands (Newman & Newman, 1988). During this time there is some identity confusion, but development continues; this leads to the development of a firm, but flexible, identity (Adler & Clark, 1991).

Late adolescence, in Western culture, is the final stage before adulthood. This development period is hallmarked by critical life transitions such as transition to college, transition to work, or transition to the military in addition to development of intimate interpersonal relationships (Dixon & Stein, 2000). Intertwined in these transitions is the ability to define “who I am” (Dixon & Stein, p. 480). Past experiences with family, peers, teachers, and community aid in this definition. Therefore, it is important to note areas of changing cultural contexts. Many late adolescents are less dependent on peers and can construct a realistic sense of self related to career goals, monogamous relationships, and personally define as well as embrace ethical and moral standards (Dixon & Stein). The continuing change of the nuclear family and community makeup related to economic changes, divorce rates, characteristics and legitimacy of homosexual relationships, and decreasing family size, as well as the legal and social repercussions of

these cultural changes, do not provide clear long-term social patterns for contemporary late adolescents.

The awareness of maintaining continuity with one's past while integrating new ideas of the self in adolescence has been noted in the literature. Fowler (1981) stated new ideas are remodeled through a relationship with a significant other while holding onto the old self to reduce anxiety about the changes. Fowler names this process identity and writes, "...[Identity] is by no means a fully conscious matter. But when it is present it gives rise to a feeling of inner firmness or of 'being together' as a self. It communicates to others a sense of personal unity or integration" (p. 77). Not discussed in the literature is what meaning adolescents ascribe to this process and how this process may be interpreted.

The embodied experience does not permit reduction in any form. Development, from an embodied perspective also resists reduction. Taking Mead's argument, late adolescent development is integrally linked to the adolescent's environment in which it takes place. Adolescents respond to their surroundings and control their responses; there can be no division between the two (Mead, 1934/1962). Therefore, the late adolescent moving through the social process of *finding myself* finds there are no any clear lines of demarcation limiting his or her experience to physiological, psychological, moral, spiritual, or emotional venues. Instead, through interaction with their environment, through the use of symbols collectively defined and used by people in the environment, late adolescents embody their development as a complete whole, moment-to-moment, reflecting their unique progress among the collective whole. In this sense, there is a

comfort with the vagueness, as Blumer (1969) calls it, between the concept and the behavior. The commonality and singularity are present simultaneously and therefore the limits blur, but the action is still present.

Summary of Model

Late adolescents are aware of their personal spirituality, although they do not link it directly to generic definitions of spirituality. Personal spirituality, represented by the sub-concept called *my core* in the model, is a unique attribute of the late adolescent that remains present throughout life with modification based on experiences and reflects maturation. Religiosity may be a way late adolescents express their personal spirituality, but they do not see the religious behaviors as their spirituality. Late adolescents identified the need for a guide to assist them in knowing good behaviors to model, including behaviors related to spirituality, and to teach them to identify this part of who they are within themselves. Late adolescents actively engaged in activities driven by their personal spiritualities and were aware of the maturational changes taking place inside them. Intervening conditions were described by the late adolescent as internal resources they drew upon to gauge whether decisions were right for them among their social environments. They used these resources as an internal compasses for their behavior. The result of these actions and intervening conditions was clarity in thought of how they were maturing and what influence(s) they had on that maturation. As a result, they were aware and embraced the intangibles of life in a more complete way and felt stability in their forming self. This stability and capacity to embrace intangibles gave them the ability to meet challenges and bear difficulties. Through an iterative process,

late adolescents were able to be successful in *finding myself*. They felt connected to who they were as an individual, the people around them, and the larger community. This connection led them to seek ways to engage in relationships at all three levels – intrapersonal, interpersonal, and extrapersonal – as they continued to mature. The feedback from consequences of an adolescent's actions returned the late adolescent back into his/her inner personal spirituality, called *my core*, to begin the cycle again and continue maturation. Through this iterative process, the meaning, beliefs, and practices of late adolescents were revealed as they actively engaged in behaviors to find out who they are. Moreover, these behaviors allowed late adolescents to feel confident that what they are defining themselves as currently will move them to be the people they want to be in the future. Their personal spirituality, *my core*, an intervening condition, was a large factor in mediating the actions of late adolescents within the contextual environment of the process, *finding myself*.

CHAPTER VI

DISCUSSION

Brief Overview of Study and Findings

The purpose of this study was to develop a theoretical model that describes the influences of spirituality and/or religiosity on behavior in late adolescence. At the time of this study, the literature had not yet addressed this relationship. The literature had clearly noted the positive relationship between spirituality and/or religiosity and behavior. The presence of spirituality and/or religion in an individual's life appeared to be associated with decreased health-risk behaviors and increased health-promoting behaviors, but the literature provided no knowledge of why the relationship existed (Callaghan, 2005; Rew & Wong, 2006; Tartaro et al., 2005). Additionally, lack of a clear definition for spirituality and/or religiosity that could be generalized across disciplinary boundaries made the concepts intangible and difficult to measure (O'Connell & Skevington, 2005; Rubin et al., 2009). Therefore, this study was an attempt to explain more deeply the influence of spirituality and/or religiosity on behavior during late adolescence. Previous research had used the terms synonymously or measured religious practices exclusively as a means to measure spirituality.

This study found that late adolescents were aware of their personal spirituality and its maturity. Moreover, the personal spirituality of late adolescents is what influenced

behavior. The generic concept of spirituality was not the same as personal spirituality, and both generic and personal spirituality were different from religion. Some participants used religion to practice their spiritualities, but noted that they were practicing religious behaviors to get in touch with their personal spiritualities or as a means of expressing their spiritualities in an overt manner. Additionally, the study illuminated the maturational experience of late adolescence in relation to personal spirituality and provided insight into the role and influence of personal spirituality on behavior during late adolescence. This process of maturing spiritually was observed to be iterative and repeated frequently throughout the developmental stage of late adolescence.

The first part of this chapter will address study limitations. Following is a discussion regarding the study and its findings specifically related to the process titled *finding myself*. During the discussion, relevant literature will be reviewed related to this *in vivo* term, *finding myself*, that emerged from the data. Also, a discussion of how embodiment is relevant to the theoretical model will be presented. Using an embodied perspective, the discussion will look at the importance of spirituality during the developmental period of late adolescence.

Subsequently, implications from the findings of this qualitative, grounded theory research study will be presented. The implications will be related to the philosophical stance of embodiment in nursing practice, education, and policy. The final part of the chapter will address future research opportunities in the field of adolescent spirituality.

Limitations

Limitations to the research study were noted, including: (a) the sample population was international in scope, (b) the participants self-selected into the study after meeting the study criteria, and (c) no participants rejected the notion of having a spiritual dimension. A discussion of these limitations are presented below.

The first limitation of the study was the population was international. The majority of participants were living outside their home countries at the time of their interview or had lived an expatriate lifestyle prior to the interview. Only two participants had lived their entire lives in their home countries of origin, without relocating for a time to a foreign country.

Culture is a system in which people interpret and make sense of the world (Pollock & Van Reken, 2001). In revealing research on culture and living abroad, Kohls (1996) explains there is surface culture, which is like an iceberg, with behavior, words, customs, and traditions above the water and deep culture with beliefs, values, assumptions, and thought processes beneath the water. Kohls purports that merely mimicking behavior, such as clothing or food, will not hold a group together. Instead, they must share the deep culture of a society to meld. The cultural balance (Kohls), unconscious knowledge of how things work in a particular community, is different for adolescents living outside their home culture than for adolescents living at home in their home country within a culture they have experienced their entire lives, and impacts both their identity formation and life experiences (Pollock & Van Reken). This “expatriate”

lifestyle, this place between two cultures, the culture of origin and culture of residence, has been termed, “Third Culture Kids” (Pollock & Van Reken).

Recent statistics estimate nearly 100,000 Americans are living and working abroad, and almost 3 million Americans are living abroad either temporarily or permanently (Smith, 1994); yet, this is in comparison to a nation of more than 300 million people. Therefore, the participants of this study experienced this change in their cultural balance at a higher level than the adolescent population in general.

The second limitation of the study was the self-selection of the participants. Adolescents who met the study inclusion criteria were invited to participate in the study. All study participants were willing and open to talk about their spirituality, religiosity, and their behaviors (including meaning, beliefs, and practices). Self-selection into the study may have swayed the results about the influence of spirituality on behavior in the process of *finding myself*. It is possible late adolescents who chose to participate had an awareness or desire to explore this dimension themselves. Therefore, the study did not capture the experience of late adolescents without this awareness or desire.

The third limitation of the study was no participant expressed a rejection of a spiritual dimension or his or her personal spiritual dimension. No participant challenged the idea of spirituality or denied his or her spiritual dimension despite variance of religious traditions and levels of religious practice. Of the 21 participants, five reported a religious affiliation that they practiced, 14 reported a religious affiliation but did not practice, and two participants did not have an affiliation with a religion and did not practice any religious traditions. It is unknown what findings would have emerged if late

adolescents who denied or rejected their spiritual dimension, or spirituality in general, would have participated in the study.

Discussion Related to the Study

Meaning of Spirituality

Definitions of spirituality seem elusory at best (Florczak, 2010), and it appears there are as many definitions of spirituality as the people defining it (Delgado, 2005). Although this study did not seek to find a definition of spirituality in a late adolescent population, the meaning of spirituality for late adolescents was recognized as different from the definition of spirituality for late adolescents. Participants were able to define what spirituality was to them, in generic terms, and often in comparison to religion. Yet, when discussing their individual spirituality, discussions focused on a more personal level and spirituality was viewed as a highly unique personal attribute. Participants called this part of themselves, *my core*; *my core* was a part of who they were that would always remain individual and unique, but would grow and change as they had more life experiences. Some participants engaged their spiritualities in relation to a particular religious practice or ideology, such as prayer; others, through secular activities, such as interaction with friends; and others did it without any defined practices or thoughts. Findings of the study show the late adolescent was aware of his or her spirituality, the maturation of his or her spirituality, and the continuous nature of his or her spirituality. Reflecting the findings of the study, Krieger-Blake's (2006) description of spirituality rings true, "Spirituality is more than the response to a religion or set of beliefs. It refers to the core of a person's being and his or her connection to the universe" (p. 338).

Addressing religiosity, the findings of the study separate the impact of religiosity on behavior as compared to spirituality. Some study participants engaged in religious practices; however when discussing their individual behaviors (including meaning, beliefs, and practices), the participant identified their own personal spirituality, *my core*, as a greater influence on behavior than religion or a generic spirituality. Participants did not discuss religion/religiosity or generic spirituality as an influence on their behaviors, even if the participants were practicing religious behaviors.

Recent studies have measured religion and religiosity and their relationship to behavior. A study investigating the relationship between use of contraceptives and religiosity among Hispanic low income youth found a negative relationship between youth with high religiosity and condom use, the more religious minded the youth, the less likely he/she was to use condoms. However, the authors noted it was not possible to confirm if condom use was directly related to the level of religiosity because they found no significant differences between study groups (Cerqueria-Santos et al., 2008). The authors did report the importance of a religious universe (a religious component of society) to adolescent populations through a shared ideological code within the social group.

Another study investigating the relationship between religiosity and oral and vaginal intercourse among adolescents noted a negative correlation emerging in the statistical analysis of their data. That is, the more religious-minded the individual, the less likely that individual would be to engage in intercourse, but researchers did not address this finding in the discussion portion of the paper (Bersamin & Walker, 2006).

An additional study investigating the relationship between religiosity and drug use among Mexican adolescents found that individuals involved in religious practices were likely to use fewer illegal drugs during their lifetime than individuals not involved in religious practices (Benjet et al., 2007). The authors were not able to explain the causal inference for this relationship, but hypothesized it was possibly due to the social environment religious affiliation provides or personal characteristics that make adolescents less likely to use drugs by managing stressful life events better. All these articles demonstrate the continued investigations showing a relationship between religiosity and behavior without clear knowledge of why that relationship exists.

This study's findings indicate personal spirituality, identified as the sub-concept, *my core*, has an influence on late adolescent behavior as related to maturation. The findings inform past research on the relationship between spirituality and behavior by illuminating some expressions of spirituality that influence behavior. Examples illustrating this, from participant interviews, include seeking friendships that are positive to the late adolescent, avoiding absenteeism in school, avoiding heavy or binge drinking, and trying to build respectful relationships with parents and/or significant adults. These findings also inform past research on religiosity by explaining the relationship between religiosity and spirituality for some late adolescents. For example, personal spirituality may be expressed through religious behaviors, but is not a universal characteristic. Because of the variance in the meaning of spirituality among study participants, the findings of the study support a notion that late adolescents need to be assessed individually to understand their unique perspectives on the relationship between religion

and their personal spirituality. Measurement of only religion or religiosity may not address the late adolescent's spirituality.

Meaning of Finding Myself

Finding myself was an *in vivo* code that emerged from the study. *Finding myself* represents an awareness the late adolescents had regarding unique developmental and maturational changes that occurred in this stage of their lives, including moving in a direction they view as corrected for themselves. This includes building relationships that are strong and that permit the late adolescent to enjoy giving as part of the relationship. Relationships at this stage of development may be intrapersonal (being forgiving and having an honest self-awareness), interpersonal (person-to-person), and extrapersonal (at the community, global, or greater good level). Throughout this process, late adolescents must not lose touch with what they have personally defined as their morals, values, beliefs, and ideals.

Finding myself encompasses many processes, some related to identity formation, some related to developmental maturation, some related to developmental tasks, and surely some others that were not directly revealed by this study. Yet, in the results of this study, participants melded these different activities together as embodied experiences. The findings of the study reinforce the need to view spirituality from an embodied perspective and the late adolescent as an embodied person who is complete moment-to-moment. Late adolescent maturation, the findings show, does not occur in isolated tasks or accomplishments to the adolescent; late adolescents experience their maturation as a complete process without gaps or divisions. In this sense, the amalgam of expressions

described by participants can be explained by an embodied experience. The adolescent engaged in behaviors stemming from this embodied maturation. Seamlessly, they moved without a thought between cognitive, physical, emotional, moral, spiritual, and behavioral development embedded in context because they were embodied. The complete integration between all types of development blurs the distinctions. Distinctions between different areas of development (cognitive, physical, emotional, etc.) exist solely to the etic observer, but the living spirituality of an embodied life cannot be fragmented.

A unique perspective in developmental psychology has come forward in the last 10 years proposing cognitive embodiment as a concept and has propelled cognitive psychology into a living form resisting reduction. Cognitive embodiment is a term used to describe cognition as intricately interwoven with bodily interactions within the world, including physical development. Cognitive embodiment proposes experiences encountered from having particular perceptions and motor capabilities are inseparably linked with reason, memory, emotion, language, and all other aspects of mental life (Thelen, Schoner, Scheier, & Smith, 2001). Cognitive embodiment diverges from the prevailing cognitive theory that understands the mind to be concerned with linking formal rules and processes to symbols in the environment which are representative of the world (Thelen et al.). Although most formal research on cognitive embodiment has occurred with infants, and with less frequency, young children, the authors of these studies project the findings to be representative of the entire life span, not just limited to infancy or childhood (Pelphrey & Reznick, 2001; Roberts, 2001; Smith & Gasser, 2005; Thelen et al., 2001).

A model proposed by Nelson (2010) holds a child to be active in his or her own development. The model does not divide the individuality of a child from the experience of the “objective” situation, nor does it remove meaning as an influence of change. A child’s experience is affected by the internal metasystems of memory, temperament, and personal embodied conditions (such as attitude or physical health) and the external metasystems of ecological, social, and cultural conditions, which include language, all of which are joined and interactive. These metasystems constitute the conditions for experiences. All systems, including the growing and changing body and brain, are taken into account. As a whole, a child’s experience is affected by all the different types of changes, levels of changes, and timings of changes coming at a child from all directions. This maelstrom of stimuli bombarding a child continuously challenges the child’s process of self-organization. The model illustrates how intimately development within biological systems, including physical development, is related to social and cultural experiences within which physical development is embedded.

In contrast to the Cartesian dualism generally found in cognitive psychology, cognitive embodiment moves away from separating what a body experiences (or senses) from the actual experiences of a person. Time and development of an individual are not isolated from what occurs around the person. Cognitive embodiment moves this dialogue toward a more connected explanation of overall development of a person and cognitive functioning.

The singular person does not exist in an embodied perspective; instead, an individual is only seen within the social process of his or her existence. Thoughts and

actions, along with their meanings, are structured from interaction with the larger world. Therefore, the way in which thoughts are processed and linked to actions is contingent on the meaning an individual ascribes to those actions based on the interaction between the individual and their surrounding community and the perceptions of the individual. Development influences how those meanings are conveyed, experienced, and interpreted. Together, an individual and his or her community, government, and world beyond epitomize an embodiment that creates the meaning of a particular moment in time. In this regard, *finding myself* becomes an outcome of the embodied developmental process of maturing during late adolescence.

Finding myself is a process related to personal spirituality, but is also connected to other parts of late adolescent development. The literature reflects a small number of studies that examined the embodied nature of development in infancy and childhood through the emerging science of cognitive embodiment (Nelson, 2010; Thelen et al., 2001). However, no studies directly researched embodied development during adolescence. Nonetheless, it has been proposed that results from studies of younger populations may be generalized and extend through the entire lifecycle of a person.

Study Implications

Embodiment and Nursing

Embodiment is a relatively new concept to nursing literature, and it has begun to challenge the holism concept. As previously discussed, embodiment is the concept that the essence of human existence is inseparable from the body (Gadow, 1980). The person is complete moment-to-moment, and within this framework, “differences are not

subordinated for the sake of harmony within the system, but preserved for the sake of the truth – the truth is whole” (Gadow, 1980, p. 173). The patient lives an embodied experience. Most patients, it could be argued, are unaware of different aspects of who they are – biological, psychological, emotional, and spiritual – as represented in holism. It would be the rare patient that could distinguish between his or her psychological and spiritual pain or identify the social versus emotional impact of his or her disease process. The embodiment of a person does not permit this type of separation. Embodiment of the patient is a natural state. Embodiment signifies a high level of sophistication where integration is so complex and complete that individual components of a system are inseparable; they cannot be isolated. Embodiment does not imply individual components of the self cannot be identified; they are important, just not isolated. Merleau-Ponty (1956/1945) explained this complete integration. “I use my fingers and my whole body as a complete organ, but also, thanks to this unity of the body, the tactile perceptions gained through an organ are immediately translated into the language of the rest” (p. 369).

It is important that nurses view the patient from an emic perspective within an embodied experience. To do so would open a vast amount of understanding and interrelationship with a patient about the patient, the patient’s needs, and the best way to address those needs.

The natural expression of embodiment is a perspective consistent with Goethean science. Johann Wolfgang Goethe (1749-1832) was a German poet, modern philosopher, and scientist. Goethe’s ontology, that everything was interrelated, appeared in his

scientific explanations. However, his scientific explanations were often discredited in relation to the more mechanistic and reductionistic methods of his contemporaries, such as Newton (Hartner, 1968; Kazlev, 2004; Stearns, 1967). Yet, as a philosophical scientist, Goethe's theories have merit and meaning. Goethean science celebrates the subjective and relational (Hartner, 1968; Kaufmann, 1980; Steuer, 2002; Whitelegg, 2003; Wilkinson & Willoughby, 1962). Steuer wrote succinctly:

Goethe insists on a continuous dialogue between experience and theoretical abstraction, and on the phenomena themselves providing the true teachings of nature. This is a necessary corrective to the idea that scientific theories are the expression of something more fundamental than the phenomena themselves. The indivisible association between knowledge and respect for the object of knowledge is at the heart of Goethe's approach." (p. 160)

Goethe's methods were an exploration of nature, through the senses, to reach the inherent wholeness of a phenomenon being studied (Whitelegg, 2003). Goethe "maintained human beings are part of nature to the extent that we use higher cognitive powers in the appropriate study of nature, he considered the human to be the most exact instrument" (Whitelegg, pp. 312-313).

To mimic Goethe's embodied scientific methods, an investigator must purposefully engage in a reciprocal, participatory relationship with what is being studied and avoid being a passive observer of an external universe; by engaging in his or her research in this manner, the observer is able to interact with the observed (Kazlev, 2004). This focus on having the object of study become part of the investigator's experience,

while simultaneously allowing the investigator to become part of the object of study's experience, allows both to realize their embodied existence. And between the two, there can be true understanding of the other. Blumer (1969) wrote:

Since action is forged by one actor out of what he perceives, interprets, and judges, one would have to see the operating situation as the actor sees it, perceived objects as the actor perceives them, ascertain their meaning in terms of the meaning they have for the actor, and follow the actor's line of conduct as the actor organizes it – in short, one would have to take the role of the actor and see his world from his standpoint. (pp. 73-74)

To truly understand a patient and not just record, observe, or measure a patient's condition (as perceived by the nurse), a nurse must begin to move into an engagement with the patient through a shared embodiment. This type of engagement will reveal a patient's perceptions, meanings – the context surrounding the patient and how that influences the patient – and not limit a nurse's approach to just a description of the patient's actions or status. Goethe's philosophical scientific approach has merit when dealing with people, in healthcare specifically. Goethean science uncovers the flaw in dividing the observation of an object from a reverence for the object under study. To do so is to lose a part of the phenomenon under study. Resisting this reductionist approach can capture something more elemental than solely the phenomenon under study. Only by engaging the self with an object under study will true meaning of a situation reveal itself. Additionally, failure to note this distinction, in hopes of remaining objective, places the

observer in danger of, “substituting his view of the field of action for the view held by the actor” (Blumer, 1969, p. 74).

Holism Versus Embodiment

Holism and embodiment do not have the same conceptual features. In holism, when one body system is impaired, all other body systems, by default, are impacted. This idea is clearly communicated by Kozier and Erb (1990), “In holistic theory, all living organisms are seen as interacting, unified wholes that are more than the mere sum of their parts. Viewed in this light, any disturbance in one part is a disturbance in the whole system” (p. 320). Embodiment does not have the same underlying principle. In embodiment, when there is impairment, it is as it is – the health impairment is blended into who that individual is at that moment. The person is not the disease and the disease is not the person; the disease is confluent with the embodied state of the person at that moment.

In holism, ideas such as compensation, dormancy, or growth are used to describe how the body adapts to changes in some of its parts to maintain the integrity of the whole. In embodiment, there are no such descriptors. The person is who they are, at that moment; there is no distinction of a past history or broken body. The person perceives, interprets, and acts based on who they are and the abilities they have at that moment. The living body does not develop ways to interact with the world, “it simply finds them” (Gadow, 1980, p. 177). This creates the embodiment of the individual, complete and whole, moment-to-moment, throughout development, and the life-span of the individual.

Nurses have looked for methods to provide structure and certainty for practice (Hartrick, 2002). Hartrick declared:

Separating epistemology from ontology and being from action, we have sought to control the human flux of relationships by employing behavioral and communication research and theories to develop methods and techniques such as behavioral communication skills....This emphasis on method not only serves to alienate nurses from their own human capacity to be in-relation, it paradoxically limits the contribution of nursing theories that could potentiate creativity and ultimately enhance the development of nurses' relational capacity. (p. 55)

The need for structure has undermined the nurse's and the patient's ability to be embodied in the nurse-patient interaction. This form has created a wall which has been managed with the paradigm of holism in nursing care, and justifiably so. Yet, it is important to recognize that nurses using holism as an epistemological base is limiting their ability to interact and engage with the patient; when nurses assess a part of the patient, they are only assessing with only part of who they are. These acts simultaneously divide the nurse and patient independently and as a dyad. Neither the nurse nor patient is complete in the holistic assessment which therefore inhibits the ability to capture accurately the complete status of the patient and denies the nurse the ability to be complete.

Change of Perspective in Nursing

Perhaps the answer to the problem of detachment between nurses and patients is to apply Goethean science to the nursing process to better understand a patient's

embodiment, and by default, the nurse's embodiment. Instead of being objective and detached when taking in information about a patient, consistent with current nursing process, a nurse might strive to affirm the primacy of the sensory experience (of nurse and patient) as a source of deeper understanding of the patient. "Staying with" the phenomena (the experience of nursing a patient) would highlight all the areas of influence on the embodied system and display the wholeness of the situation, which would include both the observed and observer (Whitelegg, 2003), in this case, the patient and the nurse. Whitelegg explained: "To see intuitively into organic/alive nature we have to put our consciousness inside it and look from within, not from outside – we look *with* the phenomenon, not at it" (p. 314). The goal is to reach the essential core of a thing that makes it what it is and explain what it becomes (Whitelegg).

Applying Goethean science to the nursing process, a nurse would examine the phenomenon of "the patient" with a patient to explore the essential nature of what makes that patient who they are, and the nurse would help the patient define what they are trying to become. Goethe criticized the use of measurement tools as a replacement of the human body in knowledge acquisition (Steuer, 2002). Therefore, the nurse would also use senses, language, and a critical mind in patient interactions to know the patient more. From this perspective, the nurse would see the phenomenon (the patient) in an embodied form, revealing an underlying meaningfulness and internal coherence to the patient's existence. This depth of understanding would contribute to nursing interventions. Carper (1978) described this "use of self" by a nurse for personal knowledge. She wrote:

The nurse in the therapeutic use of self rejects approaching the patient-client as an object and strives instead to actualize an authentic personal relationship between two persons....An authentic personal relation requires the acceptance of others in their freedom to create themselves and the recognition that each person is not a fixed entity, but constantly engaged in the process of becoming. (p. 17)

The nurse, performing activities no method or instrument is capable of, can see the embodiment of an individual and understand this embodiment through a shared humanity. This type of nursing would mandate the embodiment of the nurse and the patient, as both would need to be complete, moment-to-moment, in these interactions for growth and evolution to occur.

For Practice

Findings suggest that nurses, who have contact with late adolescents, whether in hospitals, clinics, schools, churches, youth programs, or community centers, should be aware of the influences spirituality has on behavior of individuals during late adolescence, as well as how the maturing spiritual dimension alters this relationship. Future development of nursing care standards and evidence for practice could begin to better assess and evaluate late adolescent spirituality in these settings to actualize this spirituality-behavior connection. Implementing best practices for spiritual care, such as gaining the late adolescent's perspective on their personal spirituality, would improve care for late adolescents in primary, secondary, and tertiary care environments, as well as non-health related environments such as schools, churches, and youth programs. In health care environments, development of nursing care standards that incorporate a

spiritual awareness or dimension would help move closer to meeting organizational mandates to provide and support the spiritual dimension of all persons. Outside of health care environments, best practices regarding understanding and working with late adolescent spirituality could help adults working with this population to better understand, work with, and help late adolescents grow into healthier adults.

To move towards evidence for practice, this study found assessment of the spiritual dimension in late adolescents should extend beyond asking religious affiliation or specific religious behaviors, such as prayer. Spiritual assessment of late adolescents should also include: (a) asking if they have at least one good relationship with a significant adult who they can turn to when in need; (b) asking what parts about themselves that they like and what areas are they working on developing; (c) asking what guides they use when making decisions; (d) asking what activities they usually engage in when they find themselves in difficult situations; and (e) asking how they think they are progressing in their development. Projecting an openness and non-judgmental stance to their answers is also important to increase trust and rapport during interactions.

Late adolescents can also be educated about the value of being aware and reflective of their spirituality. Talking with late adolescents about people they view as spiritual, what makes those people spiritual, and what characteristics that person brings out in them can increase awareness of personal spirituality. Helping late adolescents to understand the benefits and importance of quiet time, unplugged from televisions, computers, video game consoles, mobile phones, iPods, and other electronic devices, can be helpful to turn their perspectives inwards. Quiet time can help them think about their

inner values and morals, relationships they value, what motivates them to act, and where they want to lead their lives; this can also provide or increase inner awareness. Nurses can support environments that create opportunities for late adolescents to find time to consider their spiritual dimension.

Parents and/or guardians of late adolescents should be educated about the unique spiritual development occurring during late adolescence, as well as how a maturing person's spirituality influences behavior. Parental education should include: (a) the importance of an adolescent having a strong mutual relationship with a significant adult; (b) knowledge about what is occurring in the life of adolescents to understand the motivations driving them (i.e. school, peers, activities); (c) learning what internal controls their late adolescent identifies inside themselves to tap into their personal spirituality; and, (d) learning how the late adolescent evaluates his or her ability to become the person they want to be. If their child is associated with a religious group or practice, the parent should also know what meaning those activities and/or relationships have for the late adolescent.

Spiritual interventions that can be incorporated into youth settings (schools, youth groups, health institutions, etc.) are providing late adolescents with safe environments where they can share their personal spirituality. These safe environments help late adolescents identify the strengths they have (i.e. relationships, internal controls), and provide a venues for adolescents to discuss problems using their language and life as references for the conversation. Additionally, based on the unique nature of an

adolescent's spirituality, chaplains, formal religious leaders, youth group leaders, or significant adults can be contacted to assist with the spiritual needs of the adolescent.

In younger pediatric populations, assessments are modified to reflect the unique developmental needs of the population, such as the face pain scale. A modification of spiritual assessment should be incorporated into the care of late adolescent populations to reflect their developmental needs, such as using adolescent language to assess this inherent dimension. Spiritual assessment needs to move beyond questions of religious affiliation or religious behaviors and incorporate the embodied experience of late adolescents by seeing their spiritual dimension embodied in their maturation; this can be accomplished by asking adolescent patients questions like: Do you believe in God or a Higher Power? How do you decide what is right or wrong for you? Is there someone important you go to when you need help or want to talk; would you like me to contact them for you? What motivates you to succeed? What things do you like to do? What do you want to do with your life? Are you afraid? Do you want to talk about your fears? What do you want to know about your illness? How can I help you feel better? I'm ready to listen and talk whenever you are, just let me know when you're ready.

This study illustrates the importance of engaging with adolescents in an embodied manner. Previous studies on spirituality in late adolescence and behavior have yielded results showing relationships exists between spirituality and behavior, but without understanding of how those relationship occurs. Studying the same phenomenon from an embodied perspective yielded information about the relationship and why that relationship occurred. Therefore, it can be understood that engaging with late adolescents

in a manner which respects their inherent wholeness, awash in context, time, and development, will help the nurse provide optimal care, which is meaningful for the late adolescent.

For Teaching

Many studies identify that nurses are uncomfortable and not prepared to care for their patient's spiritual needs (Cavendish et al., 2000; Narayanasamy, 1993; O'Connor, 2001; Satterly, 2001). This study supports the inclusion of spirituality as part of basic nursing curricula so student nurses begin their career sensitized to the embodied nature of spiritual development with other developmental theories, such as Piaget, Erikson, and Kohlberg. Therefore, it is reasonable to incorporate reference to spiritual development in the clinical areas of pediatrics, mental health, maternity, and emergency/critical care. The findings of this study suggest strong communication skills, including interpersonal rapport, should be emphasized to assess late adolescent spirituality and its influence on behavior through assessment of personal spirituality. Gaps in late adolescents' understanding of who is their guide, what drives them to make decisions, what guides them internally (such as value systems and beliefs), and how those concepts allow them to strengthen their identity can signal potential for problems within the late adolescent's spiritual dimension.

Within nursing education, it has been purported that worldview, interpersonal connectedness and intrapersonal connectedness allow individual students who have a healthy spirituality to incorporate that into patient care (Pesut, 2003). Therefore, Pesut encourages nursing educators to promote discussion of worldviews in the classroom to

help prepare students in caring for people with diverse perspectives and to allow students to explore beliefs and meaning in the classroom as preparation to do so with patients in the clinical setting. Additionally, it has been noted that it may be an error to assume spiritual needs are important and relevant to all patients (McSherry & Watson, 2002). As a result, McSherry and Watson challenged researchers to develop a theory of spirituality from qualitative evidence. The findings of this study support a theory of spirituality from a qualitative perspective that can provide students with a theoretical stance in which to base their nursing care decisions. An understanding of the theory can drive patient care decisions. In this way, nurses can move through spiritual care based on the specific needs of the patient and not try to force the patient into a predefined process for addressing spiritual care, such as recording religious affiliation, and limiting opportunities for providing care.

For Policy

As stated in Chapter I, numerous health care policy groups have created statements regarding the nurse's role in providing care for patient spirituality and religious needs. The findings of this study support implementation of these policies; the participants in this study were able to identify and actualize their spiritual dimension. However, the findings of this study also support a broader view of spirituality be addressed within healthcare environments. Spirituality is not solely religion, nor can religion be negated as a component of spirituality for some individuals. Yet, the findings of this study show that spirituality, for late adolescent populations, includes aspects of psychology, morality, emotionality, and physiology. Therefore, to meet the

organizational mandates to provide spiritual care in healthcare environments, it will be important to broaden the definition of spiritual care to encompass multiple definitions that stem from the individual patient, including late adolescents.

Additional to setting healthcare policies, nurses who work in community health settings can advocate for public policies and community programs that strengthen late adolescent spirituality, such as creating environments for building relationships with significant adults (i.e. Big Brother, Big Sister programs or other mentoring programs). These programs will have to work to know the individual definition of spirituality of the persons in the community it serves. Being open and accepting of multiple variations in how spirituality is defined among adolescents will more fully address the needs of an adolescent population for a greater number of adolescents within a given population. Additionally, policy to support service-learning programs in schools can assist late adolescents in identifying value systems and becoming aware of the unique contribution they can provide to their community.

For Future Research

Nursing must continue to investigate the influence of spirituality on behavior in late adolescence. This study has uncovered stages in the maturation of spirituality and its influence on behavior related to the process of *finding myself*. The limited scope of this research design did not investigate all aspects of the relationship between late adolescent spirituality and behavior (including meaning, beliefs, and practices). Therefore, some factors that may influence this relationship may not have been uncovered. Further research can be directed at the relationship between personal spirituality, *my core*, the

process of *finding myself*, and specific health-risk and health-promotion behaviors that have been frequently noted in the literature as having a relationship to spirituality.

All late adolescents who participated in this research embraced their spiritual dimension, no participants denied spirituality on a personal or theoretical level. Therefore, the results reflect only late adolescents who are aware of their spirituality. Further research needs to be done on adolescents who do not embrace spirituality or who deny outright this inherent human aspect. This type of research would provide a comparative case in which to explore both the expression and understanding of this phenomenon. The inclusion of a secular framework for evaluating spirituality in future research is warranted. One possible perspective that could be used in further research with secular adolescents is humanism. Humanism is a philosophy which explains how humans create values and morals not based on belief in a deity but by the actions of the conscious human being (American Humanist Association, 1973). The Humanist Manifesto I outlines fifteen theses of humanism which include: (a) the universe was not created but came into its own existence, (b) humans are part of nature and is evolving, (c) rejection of dualism, (d) humans are influenced by their culture, (e) openness for the discovery of supernatural influences of values, but meanwhile ascription to the development of values based on intelligent assessment of human needs, (f) current knowledge, based on science, moves humans past previous ways of thought, such as theism or deism, (g) motivation the religious and the secular are the same which is a living a satisfying life, (h) the complete development of the human personality is the major act in living, (i) moving away from religious practices, the humanist focuses on a

the personal life and adding to a positive social environment at all levels, (j) no beliefs are to be based on the supernatural, (k) difficulties in life will be addressed through the person's natural abilities using reason and education to choose actions instead of unfounded hope and emotion, (l) humanism is focused on a joyful life and actively strives to meet goals that will provide satisfaction, (m) all relations and organizations exist for people, therefore these relations and organizations must continue to evolve to reflect current knowledge and support the purpose and needs of people, (n) all people have equal value and worth therefore economic conditions must be sought to reflect this known reality, (o) humanists work for a life that has value, opportunity, and equality for all by positive actions and clear intent to work towards these goals (American Humanist Association). The ideas of humanism, including those of the Humanist Manifesto I, are in harmony with embodiment and have been recognized in the writings of Heidegger. In this way, humanism could be used in future research to provide a non-religious foundation for examining spirituality.

Numerous research findings support this study's claim that adolescents are aware of their spirituality, interact with their spirituality, and their spirituality influences behavior. These findings have important significance when discussing further research to investigate interventions in adolescent health. Some participants shared that their spirituality helped them resist health-risk behaviors, such as negative peer groups and avoidance of binge drinking. Further exploration of why personal spirituality had this effect on some late adolescents and not others, from an embodied perspective, can move researchers closer to creating health interventions targeting known adolescent health

risks. It is only by investigating these relationships from an embodied perspective that the meaning be revealed on why the relationship exists. Additionally, the embodied perspective may also reveal the ways in which spirituality can enhance health in meaningful ways for the adolescent.

The findings regarding the embodiment of spirituality during the developmental period of late adolescent need to be researched further to better understand the complexity of this new perspective. Research on cognitive embodiment has been used only in infant and childhood populations. Further research needs to be performed on adolescent populations to understand if this developmental theory presents in late adolescence as it has been shown to in infancy. Moreover, this new developmental perspective needs to be evaluated critically for its validity.

Finally, this study employed innovative technology to recruit participants and conduct interviews. A repetition of the study in a face-to-face environment would be beneficial to understand if the insertion of technology into the qualitative research environment with late adolescents affected the research results. It must be noted the use of innovative research techniques that meet the developmental needs of a population under study should also be further employed. The participants of this study responded enthusiastically and honestly to the use of internet recruitment and email interviewing. The use of email communication was a bit slow for this population and future research could be conducted via chat, either independently, in programs such as Messenger or as an embedded program in a larger network interface program such as Facebook or

MySpace. Late adolescents respond readily to technology and are fluent in its use. To miss this opportunity to “connect” with late adolescents is to miss a great research option.

Chapter Summary

In conclusion, this chapter reviewed limitations of this study, discussed findings regarding the meaning of spirituality and of *finding myself*, and discussed the implications for philosophy in nursing, practice, teaching, and policy. Then, future research ideas were proposed. All discussions presented the complex and unique nature the late adolescent holds for their personal spirituality and how it guides them in *finding myself*. The findings of the study propose that late adolescent spirituality is related to adolescent health in many positive ways in addition to what has been represented in the literature regarding health-risk behaviors. Therefore, it may be more effective to focus on the ways in which late adolescent spirituality influences behavior in positive, developmental ways, rather than solely focusing on the relationship it has with sexual activity, drug and alcohol use, or depression. The embodied nature of *finding myself* illustrated that late adolescents are aware of their spirituality, use their spirituality in making behavior decisions, and embrace their spirituality as a vital component of who they are. To sustain a myopic focus on protecting the late adolescent from health-risk behaviors through spirituality limits the view of the relationship between spirituality and behavior to a relationship between spirituality and potential weaknesses. Instead, the researcher suggests keeping a wide-angle view and capturing the beauty expressed by an embodied experience of spirituality during late adolescence, which includes awareness of health-risk behaviors, but also includes perusals of health promoting behaviors. When

nurses learn to view adolescent patients as individuals with dignity and spiritual awareness, we will see the uniqueness of the late adolescent in their quest for adulthood as they search themselves from that unique spiritual center, *my core*, that lies within their whole being. When we learn to see adolescent patients as spiritual individuals growing, evolving, and caring as opposed to mere children or worse yet, patients, then we can truly call ourselves caregivers, or better still, nurses.

APPENDICES

APPENDIX A

TEACHER SCRIPT

You are being invited to participate in a study by Deanna Mason, a doctoral nursing student from the University of North Dakota in the United States.

Deanna's study is about how youths understand the meaning of their personal spirituality and how spirituality influences your beliefs, practices, and actions. She plans to interview approximately 25 youths to learn about the influence of spirituality in their life. If you would like to learn more about Deanna's study and how to participate, you can email her through a link on her research webpage.

Interviews will be conducted via email so there is no need to make special arrangements to meet with her face to face. You can answer the questions when you find time and have had a chance to think about your response. Most interviews will involve approximately 10 emails and finish in about a 2 week period. Your interview may be longer or shorter depending on your answers.

Any information Deanna collects from you for this study will be coded so no one, except Deanna, will know that the information came from you. In any written reports or publications, no one will be able to identify you or any of the other youths who choose to participate in this study. No one at this school/institution will know your results, including myself.

The study has the potential risk that you may become uncomfortable talking about your spirituality because spirituality is a personal and private matter. There are no direct

benefits for participating in this study and you will not receive anything for participating in the study. To encourage you to view Deanna's webpage, Deanna is raffling a 50 dollar/Euro gift certificate to FNAC/Best Buy. To be entered in the raffle, you need to visit the research webpage and email Deanna. Anyone who contacts Deanna will be entered in the drawing; study participation is not required to win.

If you are interested in learning more, there is a web page address you can visit for more information and how to participate. The web address is www.deannamasonresearch.org. [Distribution of paper with webpage address]. I will not know who participates and who doesn't participate in the study because I do not have access to any information about who visits the website and who doesn't.

APPENDIX B
LETTER OF INVITATION

Hello,

My name is Deanna Mason. I am a doctoral student at the University of North Dakota. I am inviting you to participate in a research study conducted by myself as part of my course work to complete my Ph.D. in nursing. I have developed a webpage to explain my research study and invite all youth, ages 16-21, who visit the site to consider participating in this study.

The purpose of this study is to discover how youth personally view their spirituality and what role they think it has in growing up. The results of this study will help nurses and other health care professionals to better understand people like you in order to provide better care.

If you decide to participate in this study, I will interview you electronically, by email. In this way, you won't have to find time to meet with me or answer questions right away. You can take time to think of your answers and write a response when you have free time and something to say. All the information you share with me will be coded to ensure confidentiality.

I have created a website, www.deannamasonresearch.org, you can visit to learn more about this study and how to participate in it. If you would like to participate or have questions, click on the email link on the webpage to contact me. There are links on the website with information you can review at anytime and are available in .pdf and .doc formats if you would like to print them.

To encourage you to view my website, I will be raffling a gift certificate of \$50/50Euros to Best Buy/FNAC. Any person who visits my website and emails me will be added to the drawing. You do not need to participate in the study to have your name placed in the drawing, but you do need to visit the webpage to get my research email address.

Your decision whether to participate or not to participate will not affect your relationship with any institution, including the University of North Dakota.

All information about this study is completely confidential and will only be shared with appropriate and specific persons, such as my advisor or the person who audits IRB procedures at the University of North Dakota. If you have any questions regarding this study, please contact me at 952-236-4401 (local U.S. phone number), +34 676.972.608

(local Spanish phone number) or by email at the email address listed on my webpage (I can't give you the address here!).

Thank you.

Sincerely,

Deanna Mason, RN MAN CNP-peds

APPENDIX C

WEBPAGE HOMEPAGE


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My Voice
What is
the
Influence
of
Spirituality in My
Life?



A Research Study

You can be heard. All opinions, ideas, and thoughts are welcome here. Most importantly, everything you share will be confidential and used for research purposes to help adults to better understand young people and what they think and know. Please consider participating.

This website is designed to give you information about participating in a research study designed by doctoral student and pediatric nurse Deanna Mason to learn what young people think about spirituality and how, or if, it influences their life.



This research study is designed for participants ages 16 to 21 years old. All participation is completely voluntary. To learn more about Deanna the research study and how to participate please click on the links to the right.

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[About the Study](#)

[About Deanna](#)

[Contact Information](#)


[Confidentiality Statement](#)

[Information Form](#)

[Email Involvement](#)

University of North Dakota

UND Institutional Review Board



Email: deanna@und.edu Phone: 352.236.6401 (local U.S. number) or +34 576.972.608 (local Spanish number)

Site is powered by Joomla! & Joomla!

<http://www.und.edu/research> 1 1 1 1 1

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APPENDIX D

WEBPAGE: ABOUT THE STUDY

My Voice What is the Influence of Spirituality in My Life?

A Research Study

About the Study



If you are interested in participating in this study, please click on the links to the right for more information.

It is important you understand what participating in the study means, what your rights are, and how your privacy and confidentiality will be maintained.

Be sure to ask any questions you may have before agreeing to participate in the study.

Click the link "Information Form" for detailed, specific information about the study, its risks and benefits.

When we look at things from the outside they can seem very different from how they look from the inside. Research is like this too. When researchers investigate questions about people from the outside, what data they collect can be different from the way the person being studied sees things.

This is why I would like to know what you think about your spirituality, from your perspective. I want to know if you think it's good, bad or doesn't exist. I want to know what you think. Really. This is your chance to say what you believe, think, and feel about spirituality.

For some, it may be important. For others, it may be unimportant. Yet, for others, it may be something they aren't quite sure what it is. There are all different types of people, with all different beliefs and non-beliefs. Only by hearing everyone's perspective is it possible to really understand.

Right now, a lot of research says that spirituality is important in your life. That research also says that adolescents who have strong spirituality have less risk behaviors. This may be true, or it may not. Why? Because the research is based on adults looking at the lives of adolescents from the outside. I would like to discover what spirituality means to adolescents, in their voice, and how they think it influences them as they grow up. Is what other researchers have found true? Only by knowing your perspective can the information be evaluated.

Would you consider learning more about my study by clicking the links to the right? This is your chance to say what you think and be heard.

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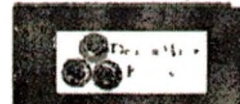

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Email Interviewing

University of North Dakota

UND Institutional Review Board



<http://www.und.edu/~education/ig/ethnographic.html>

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APPENDIX E

WEBPAGE: ABOUT THE RESEARCHER

My Voice. What is the Influence of Spirituality in My Life?

A Research Study

About Deanna



Hi! I'm Deanna Mason. I'm a pediatric nurse and a doctoral student at the University of North Dakota. I currently live in Madrid, Spain with my family.

I am excited to be working with adolescents as I continue my education. My area of interest involves creating health care environments that understand and support the needs of emerging adults. Your voice, through your participation in this study, will help me do this better.

Outside of school, work, and family, I enjoy playing the piano, guitar, and violin. In my free time enjoy riding my bike and hiking in the mountains near Madrid.

Please feel free to contact me at any time with questions or concerns you may have. I look forward to working with you and hope to learn a lot from what you share with me.

Have a wonderful day!
Deanna :o)



Here is a photo of my family taken at the Retiro Park, Madrid, Spain.

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APPENDIX F

WEBPAGE CONTACT INFORMATION

My Voice What is the Influence of Spirituality in My Life?

A Research Study

Contact Information



† If you would like to contact Deanna Mason by e-mail phone or letter:
calle Salamanca, 3
28223 Pozuelo de Alarcón
Madrid Spain
Call 1 952 236-4401 (local U.S. number) or +34 91 972 608 (local Spanish number)
Email

† If you would like to contact Deanna Mason's advisor Dr. Bette Ide by email phone or letter:
University of North Dakota
NPCBR Room 380A
400 Oxford Street Stop 9025
Grand Forks ND 58202

Home

About the Study

About Deanna

Contact Information

Confidentiality Statement

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APPENDIX G

WEBPAGE: CONFIDENTIALITY STATEMENT

My Voice
What is
the
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of Spirituality
in My Life?

A Research Study



Confidentiality
Statement



Your confidentiality is very important. What you share during the interview will be kept confidential and private. After the interview, all information will be used in a way that no one will know if the information came from you or anyone else.

There are three reasons I would break your confidentiality, these reasons are if you are going to hurt yourself, you are going to hurt someone else, or someone is hurting you. Otherwise, everything you share with me will be kept completely confidential and private. Below are two documents, one in .pdf format and one in docx format, you can read, print, and review for more information. If you have any questions or concerns, please feel free to ask me. I will be happy to answer any questions you have.

Click on the links below to read, print, and review the documents.

There are three reasons to break confidentiality, which are:

- 1 You are going to hurt yourself
- 2 You are going to hurt someone else
- 3 Someone is hurting you

Home

About the Study

About Jenna

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Email to my friend

University of North Dakota

UND Institutional Review Board



Email: jenna@dracoonresearch.org

Phone: 552.235.4401 (local U.S. number) or +34 676.972.906 (local Spanish number)

Site is powered by NetScout Solutions

<http://www.dracoonresearch.org/confidentialitystatement.htm>

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APPENDIX H


WEBPAGE: INFORMATION FORM

spirituality The Role of Spirituality within the Maturation Process of Late Adolescence My Perspective Information Form

My Voice:
What is
the
Influence
of
Spirituality in
My Life?

A Research Study


Information Form




You are invited to be in a research study investigating late adolescent spirituality because you are between the ages of 16 years and 21 years.


The purpose of this research study is to learn what meaning spirituality has for you as you grow into an adult. This knowledge will be helpful to support or contradict current research showing there is a strong connection between spirituality and decision making, but this information has been collected from adults watching adolescents. In this study, I want to know the same information but directly from you.

Any person who is to participate in a research study must agree to do so. Only when you understand the nature and risks of the research should you agree to participate. The document below, both in .pdf and .doc, provides information that is important for this understanding. Research projects include only subjects who choose to take part. Please take your time in making your decision. If you have questions at any time, please ask.



Click on the links below to view or print copies of the information and documents.

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 [Word](#)

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<http://www.und.edu/research/information/docs.html> (1/1/2010 2:31:41 AM)

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APPENDIX I

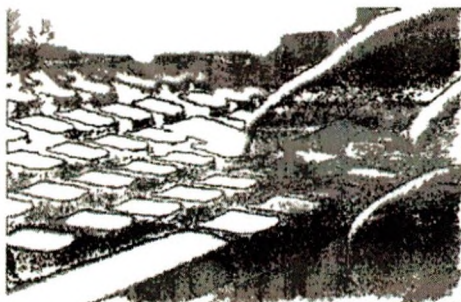
WEBPAGE: EMAIL INTERVIEWING GUIDE

Keywords: The book • Technology within the history • In the past of the A.L. series • The perspective of the interviewees

**My Voice: What
is
the
Influence
of
Spirituality in
My Life?**

A Research Study

Email Interviewing



So what does email interviewing mean? Below you can learn more how the email interview will work for this study. As always, if you have any questions or concerns, please don't hesitate to contact Deanna at the link at the bottom of the page.

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University of North Dakota

IND Institutional Review Board

You are considering to participate in a study investigating the influence of spirituality on behavior during late adolescence. The interviews for this study will happen by email. Please read the following guidelines to understand how the email interview will occur. The information gathered through the email interview will become the transcript of your ideas and thoughts. These ideas and thoughts will be used to better understand the study topic.

While participating in the email interview please note the following guidelines (James & Bushner, 2009):

- o If you would like to participate in the study, please email me, Deanna Mason, right away at _____.
- o Interviews will be conducted in the strictest confidence and your anonymity will be assured throughout the entire research project.

<http://www.industrydocuments.ucsf.edu/docs/ajm1104>

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APPENDIX J

CONFIDENTIALITY STATEMENT

All information you share with the researcher, Deanna Mason, will be considered confidential, with three exceptions:

1. You inform the researcher you are going to harm yourself;
2. You inform the researcher you are going to harm another person; or
3. You inform the researcher you are being harmed by someone else.

All information you share with the researcher will be labeled with a pseudonym (fake name) you can choose to protect your identity. All information published related to this research will be presented in a manner so you cannot be identified.

There is some risk of a breach in confidentiality or privacy because interviews are being conducted by email. This risk is the same as with all email communication; information can be intercepted while being sent back and forth electronically. There is no increased risk for email interviews than with normal email communication, but this risk should be considered when agreeing to participate.

All information will be securely located in a biometrically secured computer and password protected storage. No one will have access to this information other than the researcher. This information will only be shared with appropriate and specific persons, such as my advisor or the persons that audit IRB procedures at the University of North Dakota.

APPENDIX K
INFORMATION FORM

TITLE: The Influence of Spirituality on Behavior in Late Adolescence
PROJECT DIRECTOR: Deanna Mason, RN MAN CNP-peds
PHONE #: 1-952-236-4401 (U.S.) or +34 676.972.608 (Spain)
EMAIL: deanna@deannamasonresearch.org
DEPARTMENT: College of Nursing

STATEMENT OF RESEARCH

A person who is to participate in a research study must agree to such participation. To do so, the person must have an understanding of the nature and risks of the research. This document provides information that is important for this understanding. Research projects include only subjects who choose to take part. Please take your time in making your decision as to whether to participate. If you have questions at any time, please ask.

WHAT IS THE PURPOSE OF THIS STUDY?

You are invited to be in a research study investigating how spirituality influences the maturation or growing up process of late adolescents because you are between the ages of 16 years and 21 years.

The purpose of this research study is to learn what meaning spirituality has for you as you grow into an adult. This knowledge will be helpful to support or contradict current research showing there is a strong connection between spirituality and decision making. This study wants to learn more about this directly from you.

HOW MANY PEOPLE WILL PARTICIPATE?

Approximately 25 people will take part in this study. Youth from the United States, Spain, and around the globe will be asked to participate.

HOW LONG WILL I BE IN THIS STUDY?

Your participation in the study will last about 2 weeks and include approximately 10 emails. The interviews will be conducted through email, so you will have the ability

to answer questions when you have time and a response to give. There will be no need to visit a specific place or schedule a specific time to meet. Each interview question will take about 10 minutes to answer, but this will depend on the length of your response.

WHAT WILL HAPPEN DURING THIS STUDY?

If you are interested in learning more about the study, visit www.deannamasonresearch.org and view the webpage and links. If after viewing the webpage you decide to participate, just click on the email link embedded in the webpage or send an email to me directly at deanna@deannamasonresearch.org. I will reply to your email to acknowledge your interest and clarify any questions or concerns you may have.

After making sure you understand the study, your rights to stop participation at any time without a negative consequence, and how the email interviews will work, I will send you the first interview question. The interview will take place in the email account you emailed me from. There are five questions to the interview. You may be asked more or fewer questions depending on your answers.

During the interview time, I will ask you to tell me your thoughts about spirituality and tell me about events that have happened to you. You will choose a fake name for yourself, or I can choose one for you, and this will be how all your information is labeled; no one but me will know your response came from you. The copies of our emails will be converted into a new file and stored in a research software program that can only be accessed by me. I will delete all files and emails of our conversation of this study a minimum of three (3) years after the study is completed, as required by law.

WHAT ARE THE RISKS OF THE STUDY?

There may be some minimal risk from being in the study. A risk you may encounter in this study may be becoming uncomfortable talking about your spirituality because spirituality is a personal and private matter. However, such risks are not viewed as being in excess of “minimal risk.”

If, however, you become upset at the questions or you feel uncomfortable at any time, you may stop our electronic interview or choose not to answer a question. This can be done by sending an email with your desire to stop participation, not responding to my emails, or just writing about something different. After two virtual pokes without response, I will not contact you further.

WHAT ARE THE BENEFITS OF THIS STUDY?

You will not benefit personally from being in the study. However, the hope is, in the future, other people might benefit from this study because a better understanding of youth's ideas and thoughts will be known. This will allow nurses and other health care professionals to better serve people like you.

WILL IT COST ME ANYTHING TO BE IN THIS STUDY?

You will not have any costs for being in this research study.

WILL I BE PAID FOR PARTICIPATING?

You will not be paid for being in this research study.

WHO IS FUNDING THE STUDY?

The University of North Dakota and the research team are receiving no payments from other agencies, organizations, or companies to conduct this research study. As a student, I and the University are funding the research.

CONFIDENTIALITY

The records of this study will be kept private to the extent permitted by law. In any report about this study that might be published, you will not be identified. Your study record may be reviewed by Government agencies and the University of North Dakota Institutional Review Board.

Any information that is obtained in this study and that can be identified with you will remain confidential and will be disclosed only with your permission or as required by law. Confidentiality will be maintained by means of applying a pseudonym to your responses, keeping research data in a biometric secure laptop, backing up research materials in a password protected external hard drive, and maintaining participant demographic information on a password protected jump drive file cabinet secured in a locked space.

If I write a report or article about this study, I will describe the study results in a summarized manner so you cannot be identified.

Since all interviews are sent via email, a copy of my questions and your responses will be available to you in your sent messages folder. You have the ability to review this

information at any time. If you want to modify an answer, please forward the original email and note the text you would like modified.

I will finish working with the information you share with me in a year or less. I will erase the files of our email interviews after a minimum of three (3) years.

IS THIS STUDY VOLUNTARY?

Your participation is voluntary. You may choose not to participate or you may stop your participation at any time without penalty or loss of benefits to which you are otherwise entitled. Your decision whether or not to participate will not affect your current or future relations with any institution including the University of North Dakota.

CONTACTS AND QUESTIONS?

The researcher conducting this study is Deanna Mason, RN MAN CNP-peds. You may ask any questions you have now. If you later have questions, concerns, or complaints about the research please contact Deanna Mason, RN MAN CNP-peds at 1-952-236-4401 (local U.S. phone number) or +34 676.972.608 (local Spanish phone number) or by email at deanna@deannamasonresearch.org. You may also contact the researcher's advisor, Dr. Bette Ide, Ph.D RN at 1-701-777-4531 or by email at betteide@mail.und.edu.

If you have any questions regarding your rights as a research subject, or if you have concerns or complains about the research, you may contact the University of North Dakota Institutional Review Board at 1-701-777-4279. Please call this number if you cannot reach research staff, or you wish to talk to someone else.

HOW TO AGREE TO PARTICIPATE IN THE STUDY

To indicate that you agree to participate in this study, email me, Deanna Mason, at deanna@deannamasonresearch.org and state your desire to participate. I will ask you if you have any questions about the study and given a brief explanation of how the email interviews will work. Feel free to ask any questions you have at this time or anytime after. When I have answered all your questions, we will begin the interview.

An electronic copy of the information form will remain on the research webpage (www.deannamasonresearch.org) for your review at any time.

APPENDIX L

EMAIL INTERVIEWING GUIDE

You have agreed to participate in a study investigating the influence of spirituality on behavior in late adolescence. The interviews for this study will happen by email. Please read the following information to understand how the email interview will occur. The information gathered through the email interview will become the conversation between you and I capturing your ideas and thoughts. These ideas and thoughts will be used to better understand the study topic.

While participating in the email interview, please note the following guidelines (James & Bushner, 2009):

- If you still would like to participate in the study, please email right away to let me know.
- The interviews will be conducted in the strictest confidence and your anonymity will be assured throughout the entire research project.
- You will be sent around 10 emails which will include about 5 questions.
- These questions will be sent to you one at a time. Please respond to each question by email. Each question may be followed up by additional questions.

The goal of the email interviews is to have an ongoing discussion. To help make this happen, please be sure to:

- Write your answer to the question in the same email by “replying” to the original email rather than starting a new message. This will keep our conversation together.
- Please do not delete any part of the email conversation. It is important the questions and answers stay together so the conversation makes sense.

- Please try to respond to each email within three days, if possible. I will try to reply to your responses within the same timescale.
- If I don't hear from you in three days, I will send you a poke to see if you received my question. If after three additional days, I will send a final poke. If there is no response after the second poke, I will consider this a sign you do not wish to continue participating in the study. You will receive no future emails from me. You may, however, re-engage in the study at any time, if you choose, by sending me an email.
- It is anticipated our email conversation will be completed in about 2 weeks.
- As questions are being answered, you have the right to change any of your responses at any time. At the end of the interview, you also have the right to look over what you have said and make any changes you think need to be made, if needed.
- After our email conversation is finished, you may be contacted by email for further information or clarification.

APPENDIX M

DEMOGRAPHIC INFORMATION

To begin, I would like to collect a little demographic information so I can describe the study population. Could you tell me:

1. How old are you?
2. What year are you in school/university?
3. Are you part of a religious group? (i.e. Catholic, Lutheran, Muslim)
4. If so, do you actively engage in activities related to your religion?
5. What is your nationality? (i.e. American, Spanish, British)

APPENDIX N

INTERVIEW PROCESS

The following process will be used to collect participant interviews:

1. Interviews will be multiphasic, asynchronous and conducted via email.
2. Interested participants will email the researcher to express their interest.
3. The researcher will reply with a greeting email (Appendix X). This email will review confidentiality, the ability to withdraw from the research project at any time, and open conversation to answer any questions or concerns regarding the research process. The end of the greeting email gives instructions on how to electronically agree to participate in the study.
4. Once electronic agreement to participate is received by the researcher from the interested participant, interviews will commence.
5. The researcher will, in conversational style which incorporates electronic paralanguage, welcome the participant to the study, ask if the participant would like to choose a pseudonym for coding of data, ask the participant's age, grade, ethnicity, religious tradition (if applicable), and current country of residence and present the initial interview question, "Who is the most spiritual person you know? Tell me what makes this person spiritual?"
6. Following the initial interaction of the asynchronous interview, the researcher will use the pseudonym chosen by the participant, or assign one if the participant did not choose a pseudonym, to the interview and related notes and memos. The pseudonym will be used in coding all future interactions.

7. The researcher will begin the email interview by asking questions of less personal in nature and moving to questions more personal in nature. The participant's responses will guide the interview. The interview guide will be used judiciously; it is only a guide. The participant's responses and dialog will be clarified and verified by the researcher to grasp the influence of spirituality, including meaning, beliefs, and practices, on their behavior.
8. At the end of the asynchronous interview, the researcher will ask the participant if he/she has any questions about the data analysis process, ask permission to return to the participant after data analysis is complete for member checking, and thank the adolescent for his/her participation.

APPENDIX O

INTERVIEW GUIDE

1. Who is the most spiritual person you know? Tell me what makes this person spiritual?
2. If you choose 5 words or short phrases to describe this person, what would they be? How many of those words or phrases would describe you and why?
3. Of the words or phrases that describe you, how did you learn those things? Who taught you? Are there other things you still want to learn? Why?
4. In what situations do you realize you are using this part of who you are? What situations did you wish you had something different or more?
5. How do you think this part of you changes as you grow? Are you aware that it changes?

Narrative questions: Describe what defines you most as an individual? How are you aware of this in daily life?

APPENDIX P

GREETING EMAIL

Hello! I'm so glad you decided to contact me to learn more about participating in my study. I am very excited to learn what you have to say about the influence of spirituality in your life, like what meaning it has for you or if you have any specific beliefs or practices. What if you don't think you have a spiritual side or don't believe in spirituality...that's OK too! What I want to know is what you think, uncensored, real. I already know what adults think, but as you know, what adults think and what youth think aren't always the same thing. So, please consider sharing what you know about yourself with me ~ I am very excited to listen :o).

Before you decide to participate, please first remember that all participation is voluntary. NO ONE at your school or institution will know if you participate or not. Also, know that all the information you share with me will be confidential. EXCEPT IF...you tell me you are going to hurt yourself, you tell me you are going to hurt someone else, or you tell me you are being hurt by someone. Other than that, everything will be kept strictly confidential. Please see the information form as well as the confidentiality statement on the webpage for more information.

Finally, it is important all your questions and concerns are answered before you agree to participate. Please let me know if you would like more information on anything, or if later you have questions, it's OK to ask then too. I've attached a copy of the email

interview guide to this email if you would like to see how the interviews will work. This information is also on the website.

So, if you decide to participate, do the following:

Email me back with a pseudonym (a fake name you would like to use) and I'll send you a new email using your pseudonym and the first questions of the interview.

If you decide NOT to participant, do the following: NOTHING!

Thank you for considering participating in my study. Hopefully we will have a chance to talk.

Best regards,

Deanna Mason, RN MAN CNP-peds

Deanna@deannamasonresearch.org

<http://deannamasonresearch.org>

References

- Addraianssens, C., & Cadman, L. (1999). An adaption of moderated email focus groups to assess the potential of a new online (Internet) financial services offer in the UK. *Journal of Market Research Society*, 41(4), 417-424.
- Adler, E., & Clark, R. (1991). Adolescence: A literary passage. *Adolescence*, 26(104), 757-764.
- Akinbami, L.J., Gandhi, H., & Cheng, T.L. (2003). Availability of adolescent health services and confidentiality in primary care practices. *Pediatrics*, 111(2), 394-401.
- Ali, N.S., Ryan, M., & Carlton, K.H. (2002). The "social aspects" of the online learning community. In D. M. Billings (Ed.), *Conversations in E-learning* (pp. 163-168). Pensacola: Pohl Publishing, Inc.
- Alligood, M.R., Evans, G.W., & Wilt, D.L. (1995). King's interacting systems and empathy. In M. A. Frey & C. L. Sieloff (Eds.), *Advancing King's systems framework and theory of nursing* (pp. 66-78). Thousand Oaks: Sage.
- American Association of Colleges of Nursing. (2002). Nursing education's agenda for the 21st century, from <http://www.aacn.nche.edu/Publications/positions/nursgedag.htm>
- American Holistic Nurses Association. (2007). *Holistic nursing: Scope and standards of practice*: American Nurses Association.
- American Humanist Association. (1973). *Humanist manifesto I*. Washington D. C.: American Humanist Association.
- American Nurses Association. (2002). *Code for nurses*. Kansas City, MO: American Nurses Publishing.

- American Nurses Association. (2004). *Scope and standards of practice*. Silver Spring, MD: American Nurses Association.
- Aromin Jr., R.A., Galanter, M., Solhkhah, R., Dermatis, H., & Bund, G. (2006). Preference for spirituality and twelve-step-orientation approaches among adolescents in a residential therapeutic community. *Journal of Addictive Diseases*, 25(2), 89-96.
- Asociacion para la investigacion de medios de comunicacion. (2009). Audiencia de Internet. Madrid: AIMC.
- Barnes, L.P., Plotnikoff, G.A., Fox, K., & Pendleton, S. (2000). Spirituality, religion, and pediatrics: Intersecting worlds of healing. *Pediatrics*, 104(6), 899-908.
- Beevor, A. (2006). *The battle for Spain: The Spanish civil war 1936-1939*. London: Penguin.
- Benjet, C., Borges, G., Medina-Mora, M.E., Fleiz, C., Blanco, J., Zambrano, J. et al. (2007). Prevalence and socio-demographic correlates of drug use among adolescents: results from the Mexican Adolescent Mental Health Survey *Addiction*, 102, 1261-1268.
- Benson, P.L., & Roehlkepartain, E.C. (2008). Spiritual development: A missing priority in youth development. *New Directions for Yourth Development*, Summer 2008(118), 13-28.
- Bergman, D.A., Brown, N.L., & Wilson, S. (2008). Teen use of a patient portal: A qualitative study of parent and teen attitudes. *Perspectives in Health Information Management*, 5, 13-22.
- Berry, W. (1987). *Home economics*. Berkley, CA: Counterpoint.
- Berry, W. (2002). *The art of the commonplace: The agrarian essays of Wendell Berry*. Berkley: Counterpoint.
- Bersamin, M.M., & Walker, S. (2006). Correlates of oral sex and vaginal intercourse in early and middle adolescence. *Journal of Research on Adolescence*, 16(1), 59-68.

- Billings, D.M. (2005). From teaching to learning in a mobile, wireless world. *Journal of Nursing Education*, 44(8), 343.
- Blumer, H. (1969). *Symbolic interactionism: Perspective and method*. Berkeley: University of California Press.
- Blumer, H. (2004). *George Herbert Mead and Human Conduct*. Walnut Creek: Alta Mira Press.
- Bowker, N., & Tuffin, K. (2004). Using the online medium for discursive research about people with disabilities. *Social Science Computer Review*, 22(2), 228-241.
- Broccolo, G.T. (1990). *Vital spiritualities: Naming the holy in your life*. Notre Dame, IN: Ave Maria Press.
- Brown, J.D. (2001). Body and spirit: Religion, spirituality, and health among adolescents. *Adolescent Medicine: State of the Art Reviews*, 12(3), 509-523.
- Brown, S.A., McGue, M., Maggs, J., Schulenberg, J., Hingson, R., Swartzwelder, S. et al. (2008). A developmental perspective on alcohol and youths 16 to 20 years of age. *Pediatrics*, 121, S290-S310.
- Buck, H.G. (2006). Spirituality: Concept analysis and model development. *Holistic Nursing Practice*, 20(6), 288-292.
- Bundesamt für Gesundheit. (2009). Tschau.ch:E-beratung und jugendinformation, from <http://www.tschau.ch/cms/index.php>
- Burcher, N. (2009). Facebook usage statistics September 2009: Huge growth in the Far East Retrieved December 7, 2009, from <http://www.nickburcher.com/2009/09/facebook-useage-statistics-sep-09-huge.html>
- Burris, J.L., Brechting, E.H., Salsman, J.M., & Carlson, C.R. (2009). Factors associated with the psychological well-being and distress of university students. *Journal of American College Health*, 57(5), 536-543.

- Callaghan, D.M. (2005). The influence of spiritual growth on adolescents' initiative and responsibility for self-care. *Pediatric Nursing*, 31(2), 91-115.
- Carper, B.A. (1978). Fundamental patterns of knowing in nursing. *Advances in Nursing Science*, 1(11), 13-23.
- Cavendish, R., Luise, B.K., Horne, K., Bauer, M., Gallo, M.A., Medefindt, J. et al. (2000). Opportunities for enhanced spirituality relevant to well adults. *Nursing Diagnosis: International Journal of Nursing Language and Classification*, 11, 151-162.
- Cavendish, R., Luise, B.K., Russo, D., Mitzeliotis, C., Bauer, M., Bajo, M.A.M. et al. (2004). Spiritual perspectives of nurses in the United States relevant for education and practice. *Western Journal of Nursing Research*, 26(2), 196-212.
- Cerqueria-Santos, E., Koller, S., & Wilcox, B. (2008). Condom use, contraceptive methods, and religiosity among youth of low socioeconomic level. *The Spanish Journal of Psychology*, 11(1), 94-102.
- Childs, G., Moneyham, L., & Felton, G. (2008). Correlates of sexual abstinence and sexual activity of low-income African American adolescent females. *Journal of the Association of Nurses in AIDS Care*, 19(6), 432-442.
- Clarke, J. (2009). A critical view of how nursing has defined spirituality. *Journal of Clinical Nursing*, 18, 1666-1673.
- Coles, R. (1990). *The spiritual life of children*. Boston: Houghton Mifflin.
- Coles, R., Elkind, D., Monroe, L., Shelton, C., & Soaries, B. (1995). *The ongoing journey: Awakening spiritual life in at-risk youth*. Boys Town: Boys Town Press.
- Conference latine des responsables de l'action sanitaire et sociale. (2009). Ciao: Le site d'info pour les ados Retrieved September 17, from <http://www.ciao.ch>
- Corbin, J., & Strauss, A. (2008). *Basics of qualitative research 3e: Techniques and procedures for developing grounded theory* (3rd ed.). Thousand Oaks: Sage.

- Cotton, S., Kudel, I., Robers, Y.H., Pallerla, H., Tsevat, J., Succop, P. et al. (2009). Spiritual well-being and mental health outcomes in adolescents with or without inflammatory bowel disease. *Journal of Adolescent Health*, 44, 485-492.
- Cotton, S., Zebracki, K., Rosenthal, S.L., Tsevat, J., & Drotar, D. (2006). Religion/spirituality and adolescent health outcomes: A review. *Journal of Adolescent Health*, 38, 472-480.
- Covey, N. (2009). Flying Fingers. *Insight* Retrieved December 9, 2009, from http://en-us.nielsen.com/main/insights/consumer_insight/issue_12/flying_fingers
- Creswell, J.W. (2003). *Research design: Qualitative, quantitative, and mixed methods approaches* (2nd ed.). Thousand Oaks, CA: Sage Publications, Inc.
- Crow, J.A. (1985). The land: The people. In J. A. Crow (Ed.), *Spain: The root and the flower* (pp. 1-22). Berkeley: University of California Press.
- Cuevas, T. (1998). *Prison of Women: Testimonies of War and REsistance in Spain, 1939-1975* (M. E. Giles, Trans.). Albany: State University of New York Press.
- Delgado, C. (2005). A discussion of the concept of spirituality. *Nursing Science Quarterly*, 18, 157-162.
- Dell, M.L. (2004). Religious professionals and institutions: Untapped resources for clinical care. *Child and Adolescent Psychiatric Clinics of North America*, 13, 85-110.
- Descartes, R. (1993/1641). *Meditations on first philosophy* (D. A. Cress, Trans. 3rd ed.). Indianapolis: Hackett Publishing.
- Descartes, R. (2005/1641). Discourse on the method of rightly conducting the reason and seeking truth in sciences Retrieved April 22, 2006, from <http://www.literature.org/authors/descartes-rene/reason-discourse/chapter-04.html>
- Desrosiers, A., & Miller, L. (2007). Relational spirituality and depression in adolescent girls. *Journal of Clinical Psychology*, 63(10), 1021-1037.

- Dew, R.E., Daniel, S., S., Armstrong, T.D., Goldston, D.B., Triplett, M.F., & Koenig, H.G. (2008). Religion/spirituality and adolescent psychiatric symptoms: A review. *Child Psychiatry and Human Development*, 39, 381-398.
- Dew, R.E., Daniel, S., S., Goldston, D.B., McCall, W.V., MKuchibhatla, M., Schleifer, C. et al. (2009). A prospective study of religion/spirituality and depressive symptoms among adolescent psychiatric patients. *Journal of Affective Disorders*, doi:10.1016/j.jad.2009.04.029, Epub ahead of print.
- DiNardo, P.B. (1989). Evaluation of the nursing theory of Imogene M. King. In J. P. Riehl-Sisca (Ed.), *Conceptual models for nursing practice* (3rd ed., pp. 159-166). Norwalk: Appleton and Lange.
- Dirck, H.J., & Bekkum, M.A. (1995). The times they are a'changin': Adolescents left alone! Adolescence, health and ethnicity: Cross-cultural lessons from anthropology. *International Journal of Medicine and Health*, 8(4), 243-260.
- Dixon, S., & Stein, M. (2000). *Encounters with children* (3rd ed.). St. Louis: Mosby.
- Doka, K.J. (1994). Suffer the little children: The child and spirituality in the AIDS crisis. In B. Danc & C. Levine (Eds.), *AIDS and the New Orphans* (pp. 33-41). Westport: Auburn House.
- Dossey, B. (1998). Florence Nightingale: A 19th-century mystic. *Journal of Holistic Nursing*, 16(2), 111-164.
- Dossey, B., & Dossey, L. (1998). Body-Mind-Spirit: Attending to holistic care. *American Journal of Nursing*, 98(8), 35-38.
- Egan, J., Chenoweth, L., & McAuliffe, D. (2006). Email-facilitated qualitative interviews with traumatic brain injury survivors: A new and accessible method. *Brain Injury*, 20(12), 1283-1294.
- Elkins, M., & Cavendish, R. (2004). Developing a plan for pediatric spiritual care. *Holistic Nursing Practice*, 18(4), 179-184.

- Emmett, J.A. (2008). Spiritual development in faith communities and secular societies. *New Directions for Yourth Development, Summer 2008*(118), 45-58.
- Erikson, E.H. (1963). *Childhood and society* (2nd ed.). New York: W. W. Norton & Co.
- Europa Press Releases. (2009). EU telecoms reform: 12 reforms to pave way for stronger consumer rights, an open internet, a single European telecoms market and high-speed internet connections for all citizens Retrieved December 7, 2009, from <http://europa.eu/rapid/pressReleasesAction.do?reference=MEMO/09/513&format=HTML&age>
- Facebook. (2009). Statistics: International growth. Retrieved December 7, 2009, from <http://www.facebook.com/press/info.php?statistics>
- Fehring, R.J., Brennan, P.F., & Keller, M.L. (1987). Psychological and spiritual well-being in college students. *Research in Nursing and Health*, 10(6), 391-398.
- Florczak, K.L. (2010). Gathering information on spirituality: From whose perspective? *Nursing Science Quarterly*, 23(3), 201-205.
- Fontana, A., & Frey, J. (1994). Interviewing: The art of science. In N. Denzin & Y. Lincoln (Eds.), *Handbook of Qualitative Research*. London: Sage.
- Fosarelli, P. (2003). Children and the development of faith: Implications for pediatric practice. *Contemporary Pediatrics*, 20(1), 85-86.
- Fowler, J.W. (1981). *Stages of faith: The psychology of human development and the quest for meaning*. San Francisco: Harper & Row.
- Fowler, J.W., & Dell, M.L. (2004). Stages of faith and identity: Birth to teens. *Child and Adolescent Psychiatric Clinics of North America*, 13, 17-33.
- Frank, N.C., & Kendall, S.J. (2001). Religion, risk prevention and health promotion in adolescents: A community-based approach. *Mental Health, Religion, & Culture*, 4(2), 133-148.

- Gadow, S. (1980). Body and self: A dialectic. *Journal of Medicine and Philosophy*, 5(3), 172-185.
- Gallup, G.H., & Bezilla, R. (1992). *The religious life of young americans: A compendium of surveys on the spiritual beliefs and practices of teen-agers and young adults*. Princeton, NJ: Gallup International Institute.
- Garbarino, J., & Bedard, C. (1996). Spiritual challenges to children facing violent trauma. *Childhood*, 3(4), 467-478.
- Garcia de Cortazar, F., & Gonzalez Vesga, J.M. (2000). *Breve historia de Espana*. Madrid: Alianza Editorial.
- Glaser, B.G. (1978). *Theoretical sensitivity: Advances in the methodology of grounded theory*. Mill Valley, CA: Sociology Press.
- Glaser, B.G., & Strauss, A.L. (1967). *The discovery of grounded theory: Strategies for qualitative research*. New Brunswick, NJ: Aldine Transaction.
- Green, M. (2008). Putting spiritual development of young people on the map: An English perspective. *New Directions for Youth Development*, Summer 2008(118), 59-72.
- Greenwald, D.F., & Harder, D.W. (2003). The dimensions of spirituality. *Psychological Reports*, 92(975-980).
- Grey, N.J., Klein, J.D., Noyce, P.R., Sesselberg, T.S., & Cantrill, J.A. (2005). The internet: A window on adolescent health literacy. *Journal of Adolescent Health*, 37, 243-250.
- Griffin, A. (1993). Holism in nursing: Its meaning and value. *British Journal of Nursing*, 2(6), 310-312.
- Ham-Ying, S. (1993). Analysis of the concept of holism within the context of nursing. *British Journal of Nursing*, 2(15), 771-775.

- Hamilton, R.J., & Bowers, B.J. (2006). Internet recruitment and e-mail interviews in qualitative studies. *Qualitative Health Research*, 16(6), 821-835.
- Hart, B., & Risley, T.R. (1995). *Meaningful differences in the everyday experiences of young American children*. Baltimore: Paul H. Brookes Publishing
- Hartner, W. (1968). *Goethe and the natural sciences*. Englewood Cliffs, N. J.: Prentice-Hall, Inc.
- Hartrick, G.A. (2002). Transcending the limits of method: Cultivating creativity in nursing. *Research and Theory for Nursing Practice: An International Journal*, 16(1), 53-62.
- Heath, S., Brooks, R., Cleaver, E., & Ireland, E. (2009). *Researching young people's lives*. Los Angeles: Sage.
- Heidegger, M. (1926/1962). *Being and time* (J. Macquarrie & E. Robinson, Trans.). Malden, MA: Blackwell.
- Hewson, C., Yule, P., Laurent, D., & Vogel, C. (2003). *Internet research methods: A practical guide for the social and behavioural sciences*. London: Sage.
- Hill, P.C., & Pargament, K.I. (2003). Advances in the conceptualization and measurement of religion and spirituality: Implications for physical and mental health research. *American Psychologist*, 58(1), 64-74.
- Hockenberry, M.J., & Wilson, D. (2006). *Wong's nursing care of infants and children* (8th ed.). St. Louis, MO: Mosby.
- Hodge, D.R. (2000). Spirituality: Towards a theoretical framework. *Social Thought, Journal of Religion in the Social Sciences*, 19(4), 1-20
- Holder, D.W., Durant, R.H., Harris, T.L., Daniel, J.H., Obeidallah, D., & Goodman, E. (2000). The association between adolescent spirituality and voluntary sexual activity. *Journal of Adolescent Health*, 26(4), 295-302.

- Hollins, S. (2005). Spirituality and religion: Exploring the relationship. *Nursing Management*, 12(6), 22-26.
- Homan, R. (1991). *The ethics of social research*. Harlow: Longman.
- Houskamp, B.M., Fisher, L.A., & Stuber, M.L. (2004). Spirituality in children and adolescents: Research findings and implications for clinicians and researchers. *Child and Adolescent Psychiatric Clinics of North America*, 13, 221-230.
- Hume, D. (1969/1739). A treatise of human nature: Being an attempt to introduce the experimental method of reasoning into moral subjects. In E. C. Mossner (Ed.), *David Hume: A treatise of human nature* (pp. 35-678). London, England: Penguin Books. (Reprinted from: 1969 1985).
- Hume, D. (1993/1777). An enquiry concerning human understanding. In E. Steinberg (Ed.), *David Hume: An enquiry concerning human understanding* (2nd ed., pp. 1-142). Indianapolis: Hackett Publishing Company.
- Hurd, N., & Zimmerman, M. (2010). Natural mentors, mental health, and risk behaviors: A longitudinal analysis of African American adolescents transitioning into adulthood. *American Journal of Community Psychology*, Epub ahead of print.
- Hussong, A. (2000). Perceived peer context and adolescent adjustment. *Journal of Research on Adolescence*, 10, 4-14.
- IAB Spain Research. (2009). Estudio sobre redes sociales en Internet (pp. 167). Madrid: Elogia Ipsosfacto.
- Inside Facebook. (2009, February 2). Facebook US audience growth by age and gender Retrieved September 17, from <http://www.insidefacebook.com/2009/02/02/fastest-growing-demographic-on-facebook-women-over-55/>
- Institute of Medicine. (2003). *Health professions education: A bridge to quality*. Washington: National Academies Press.

- International Council of Nurses. (2000). The ICN code of ethics for nurses Retrieved December 9, 2005, from www.icn.ch/icncode.pdf
- International Council of Nurses. (2006). The ICN code of ethics for nurses. Geneva, Switzerland: International Council of Nurses.
- Irwin, C.E., Burg, S.J., & Cart, C.U. (2002). American's adolescents: Where have we been, where are we going? *Journal of Adolescent Health, 31*, 91-121.
- James, N. (2003). *Teacher professionalism, teacher identity: How do I see myself?* Dissertation. University of Leicester. Leicester, England.
- James, N., & Bushner, H. (2009). *Online interviewing*. Los Angeles: Sage.
- Joinson, A. (2005). Internet behaviour and the design of virtual methods. In C. Hines (Ed.), *Virtual Methods: Issues in Social Research on the Internet*. Oxford: Berg.
- Jones, A.S. (2003). Young people's perceptions of and access to health advice. *Nursing Times, 99*(30), 32-35.
- Josephson, A.M., & Dell, M.L. (2004). Religion and spirituality in child and adolescent psychiatry: A new frontier. *Child and Adolescent Psychiatric Clinics of North America, 13*, 1-15.
- Josephson, A.M., Peters, C.K., & Dell, M.L. (2007). Adolescent dysphoria, sexual behavior and spirituality. *Southern Medical Journal, 100*(6), 633-634.
- Kaufmann, W. (1980). *Discovering the mind: Goethe, Kant, and Hegel*. New York: McGraw-Hill.
- Kazak, A.E., Barakat, L.P., Meeske, K., Christakis, D., Meadows, A.T., Casey, R. et al. (1997). Posttraumatic stress, stress symptoms, family functioning, and social support in survivors of childhood leukemia and their mothers and fathers. *Journal of Consulting and Clinical Psychology, 65*(1), 120-129.

- Kazdin, A.E. (2003). Methodology: What is is and why it is so important. In A. E. Kazdin (Ed.), *Methodological issues and strategies in clinical research* (3rd ed.). Washington, D.C.: American Psychological Association.
- Kazlev, M.A. (2004). Goethean science Retrieved April 27, 2006, from <http://www.kheper.net/metamorphosis/Goethean.html>
- Kendler, K.S., Gardner, C.O., Annas, P., & Lichtenstein, P. (2008). The development of fears from early adolescence to young adulthood: A multivariate study. *Psychological Medicine*, 38, 1759-1769.
- Kenny, G., & Ashley, M. (2005). Children's student nurses' knowledge of spirituality and its implications for education practice. *Journal of Child Health Care*, 9(3), 174-185.
- Kivits, J. (2005). Online interviewing and the research relationship. In C. Hine (Ed.), *Virtual Methods: Issues in Social Research on the Internet*. Oxford: Berg.
- Koenig, H.G., & Cohen, H.J. (2006). Spirituality across the lifespan. *Southern Medical Journal*, 99(10), 1157-1158.
- Kohls, L.R. (1996). *Survival kit for overseas living* (3rd ed.). Yarmouth: Intercultural Press.
- Kolcaba, R. (1997). The primary holisms in nursing. *Journal of Advanced Nursing*, 25, 290-296.
- Kozier, B., & Erb, G. (1990). *Concepts and issues in nursing practice*. Menlo Park, CA: Addison-Wesley.
- Krieger-Blake, L.S. (2006). Changes that affect independence in later life. In K. L. Mauk (Ed.), *Gerontological nursing competencies for care*. Sudbury, MA: Jones and Bartlett.
- Labun, E. (1988). Spiritual care: An element in nursing care planning. *Journal of Advanced Nursing*, 13, 314-320.

- Lau, P.S.Y. (2006). Spirituality as a positive youth development construct: Conceptual bases and implications for curriculum development. *International Journal of Adolescent Medical Health*, 18(3), 363-370.
- Laukhuf, G., & Werner, H. (1998). Spirituality: The missing link. *Journal of Neuroscience Nursing* 30(1), 60-67.
- Levine, M.E. (1969). The pursuit of wholeness. *American Journal of Nursing*, 69(1), 93-98.
- Lifelong Learning UK. (2008). List of Professional and National Occupational Standards for Youth Work Retrieved August 18, 2009, from http://www.lluk.org/documents/whole_suite_of_Professional_and_National_Occupational_Standards_for_Youth_Work.pdf
- Lin, N., & Peck, K. (1999). Social networks and mental health. In A. V. Horwitz & T. L. Scheid (Eds.), *A handbook for the study of mental health: Social context, theories, and systmes* (pp. 241-258). Cambridge: Cambridge University Press.
- Lincoln, Y.S., & Guba, E.G. (1985). *Naturalistic inquiry*. Beverly Hills, CA: Sage Publishing.
- Locke, J. (1995/1689). An essay concerning human understanding Retrieved April 22, 2006, from http://www.ilt.columbia.edu/publications/locke_understanding.html
- Locke, J. (1996/1689). An essay concerning human understanding. In K. P. Winkler (Ed.), *John Lock: An essay concerning human understanding* (pp. 1-380). Indianapolis: Hackett Publishing.
- Lorenz, K.A., Hays, R.D., Shapiro, M.F., Cleary, P.D., Asch, S.M., & Wenger, N.S. (2005). Religiousness and spirituality among HIV-infected Americans. *Journal of Palliative Medicine*, 8(4), 774-781.
- MacDonald, D.A. (2000). Spirituality: Description, measurement, and relation to the Five Factor Model of Personality. *Journal of Personality*, 68(1), 153-197.

- MacDonald, D.A., & Holland, D. (2003). Spirituality and the MMPI-2. *Journal of Clinical Psychology*, 59(4), 399-410.
- MacGillivray, P.S., Sumsion, T., & Wicks-Nicholls, J. (2006). Critical elements of spirituality as identified by adolescent mental health clients. *Canadian Journal of Occupational Therapy*, 73(5), 295-302.
- Mackey, M.C. (2007). Evaluation of qualitative research. In P. L. Munahll (Ed.), *Nursing Research: A Qualitative Perspective* (4th ed., pp. 555-568). Boston: Jones and Bartlett.
- Madge, C., & O'Connor, H. (2005). Mothers in the making? Exploring notions of liminality in hybrid cyberspace. *Transactions of the Institute of British Geographers*, 3(1), 83-97.
- Mann, C., & Stewart, F. (2000). *Internet communication and qualitative research*. Thousand Oaks, CA: Sage.
- Mann, C., & Stewart, F. (2005). *Internet communication and qualitative research: A handbook for researching online*. London: Sage.
- Marshall, C. (1990). Goodness criteria: Are they objective or judgment calls? In E. G. Guba (Ed.), *The Paradigm Dialog*. Newbury Park: Sage.
- Mason, D.M. (2001). *The lived experience of spirituality in late adolescence*. Masters of Arts Master's thesis, The College of St. Catherine, Saint Paul, Minnesota.
- McCannon, M., & O'Neal, P.V. (2003). Results of a national survey indicating information technology skills needed by nurses at time of entry into the work force. *Journal of Nursing Education*, 42(8), 337-340.
- McCree, D.H., Wingood, G.M., DiClemente, R., & Harrington, K.F. (2003). Religiosity and risky sexual behavior in African-American adolescent females. *Journal of Adolescent Health*, 33(1), 2-8.
- McEvoy, M. (2000). An added dimension to the pediatric health maintenance visit: The spiritual history. *Journal of Pediatric Health Care*(14), 216-220.

- McEvoy, M. (2003). Culture and spirituality as an integrated concept in pediatric care. *American Journal of Maternal Child Nursing*, 28(1), 39-43.
- McNeil, B.J., Elfrink, V.L., Bickford, C.J., Pierce, S.T., Beyea, S.C., Averill, C. et al. (2003). Nursing information technology knowledge, skills, and preparation of student nurses, nursing faculty, and clinicians: A U.S. survey. *Journal of Nursing Education*, 42(8), 341-349.
- McPherson, A., & Macfarlane, A. (2009, September 16). Teenage Health Freak Retrieved September 17, from <http://www.teenagehealthfreak.org/homepage/index.asp>
- McSherry, W. (2006). The principal components model: A model for advancing spirituality and spiritual care within nursing and health care practice. *Journal of Clinical Nursing*, 15, 905-917.
- McSherry, W., & Smith, J. (2007). How do children express their spiritual needs? *Paediatric Nursing*, 19(3), 17-20.
- McSherry, W., & Watson, R. (2002). Spirituality in nursing care: evidence of a gap between theory and practice. *Journal of Clinical Nursing*, 11, 843-844.
- Mead, G.H. (1934/1962). *Mind, self, and society from the standpoint of a social behaviorist*. Chicago: The University of Chicago Press.
- Meeker, M., Devitt, S., & Wu, L. (2010). Internet trends (pp. 87): Morgan Stanley.
- Merleau-Ponty, M. (1956/1945). *Phenomenology of perception* (C. Smith, Trans.). London: Routledge Classics.
- Meyer, C.L. (2003). How effectively are nurse educators preparing students to provide spiritual care? *Nurse Educator*, 28(4), 185-190.
- Michaud, P.A., & Colom, P. (2003). Implementation and evaluation of an Internet health site for adolescents in Switzerland. *Journal of Adolescent Health*, 33, 287-290.

- Miniwatts Marketing Group. (2009). Internet usage in Asia Retrieved December 7, 2009, from <http://www.internetworldstats.com/stats3.htm>
- Montero, R. (1995). The silent revolution: The social and cultural advances of women in Democratic Spain. In H. Graham & J. Labanyi (Eds.), *Spanish Cultural Studies: An Introduction - Struggle for Modernity*. Oxford: Oxford University Press.
- Moreira-Almeida, A., & Koenig, H.G. (2006). Retaining the meaning of the words religiousness and spiritual: A commentary on the WHOQOL SRPB group's "A cross-cultural study of spirituality, religion, and personal beliefs as components of quality of life: (62:6, 2005, 1486-1497). *Social Science and Medicine*, 63, 843-845.
- Morreale, M.C., Kapphahn, C.J., Elster, A.B., Juszczak, L., & Klein, J.D. (2004). Access to health care for adolescents and young adults. *Journal of Adolescent Health*, 35, 342-344.
- Morwood, J., & Taylor, J. (Eds.). (2002) *Pocket Oxford Classical Greek Dictionary*. Oxford: Oxford University Press.
- Munhall, P.L. (2007a). The landscape of qualitative research. In P. L. Munhall (Ed.), *Nursing research: A qualitative perspective* (4th ed.). Boston: Jones and Bartlett.
- Munhall, P.L. (2007b). *Nursing research: A qualitative perspective* (4th ed.). Sudbury, MA: Jones and Bartlett Publishers.
- Murray, R.B., & Zenter, J.B. (1989). *Nursing Concepts for Health Promotion*. London: Prentice Hall.
- Narayanasamy, A. (1993). Nurses' awareness and preparedness in meeting their patients' spiritual needs. *Nurse Education Today*, 13(3), 195-201.
- National Health Service. (2003). Meeting the religious and spiritual needs of patients and staff. In Department of Health (Ed.), *Guidance for managers and those involved in the provision of chaplaincy-spiritual care* (pp. 35). London: Crown Copyright.

- National Institute for Clinical Excellence. (2004). Guidance on cancer services: Improving supportive and palliative care. London: National Health Service.
- National League for Nursing. (2003a). Innovation in nursing education: A call to reform. Retrieved November 15, 2005, from <http://www.nln.org/aboutnln/positionstatements/innovation.htm>
- National League for Nursing. (2003b). Priorities for research in nursing education. Retrieved November 15, 2005, from <http://www.nln.org/aboutnln/research.htm>
- National Statistics Institute. (2009). Socio-demographic Profile of Internet Users. Madrid: Gobierno de Espana.
- Nelson, K. (2010). Developmental narratives of the experiencing child. *Child Development Perspectives*, 4(1), 42-47.
- Neuman, B. (1995). *The Neuman systems model* (3rd ed.). Norwalk, CT: Appleton & Lange.
- Newacheck, P.W., Hung, Y.Y., Park, M.J., Brindis, C.D., & Irwin, C.E. (2003). Disparities in adolescent health and health care: Does socioeconomic status matter? *Health Services Research*, 38(5), 1235-1252.
- Newman, B.M., Newman, P.R., Griffen, S., O'Connor, K., & Spas, J. (2007). The relationship of social support to depressive symptoms during the transition to high school. *Adolescence*, 42, 441-459.
- Newman, M.A. (1995). *A developing discipline: Selected works of Margaret Newman*. New York: National League for Nursing Press.
- Newman, P.R., & Newman, B.M. (1988). Differences between childhood and adulthood: The identity watershed. *Adolescence*, 23(91), 551-557.
- Newman, P.R., & Newman, B.M. (2001). Group identity and alienation: Giving the we its due. *Journal of Youth and Adolescence*, 30, 515-538.

- Nicholi, A.M. (2002). *The question of God: C. S. Lewis and Sigmund Freud debate God, love, sex, and the meaning of life*. New York: Simon and Schuster.
- Nightingale, F. (1974). *Letters of Florence Nightingale in the history of nursing archive*. Boston: Boston University Press.
- Nonnemaker, J.M., McNeely, C.A., & Blum, R.W. (2003). Public and private domains of religiosity and adolescent health risk behaviors: Evidence from the National Longitudinal Study of Adolescent Health. *Social Science and Medicine*, 57, 2049-2054.
- North American Nursing Diagnosis Association. (2001). *NANDA nursing diagnoses: Definitions and classification 2001-2002*. Philadelphia: North American Nursing Diagnosis Association.
- O'Connell, K.A., & Skevington, S.M. (2005). The relevance of spirituality, religion and personal beliefs to health-related quality of life: Themes from focus groups in Britain. *British Journal of Health Psychology*, 10, 379-398.
- O'Connor, C.I. (2001). Characteristics of spirituality, assessment and prayer in holistic nursing. *Nursing Clinics of North America*, 36(2), 33-46.
- Ortiz, L., Villereal, S., & Engel, M. (2000). Culture and spirituality: A review of literature. *Social Thought*, 19(2), 21-36.
- Palmer, P.J. (1993). *To know as we are known: Education as a spiritual journey*. San Francisco: Harper.
- Pasch, K.E., Nelson, M.C., Lytle, L.A., Moe, S.G., & Perry, C.L. (2008). Adoption of risk-related factors through early adolescence: Associations with weight status and implications for causal mechanisms. *Journal of Adolescent Health*, 43(4), 387-393.
- Pehler, S.-R. (1997). Children's spiritual response: Validation of the nursing diagnosis Spiritual Distress. *Nursing Diagnosis*, 8(2), 55-66.

- Pellebon, D.A., & Anderson, S.C. (1999). Understanding the life issues of spiritually-based clients. *Families in Society: The Journal of Contemporary Human Services*, 80(3), 229-238.
- Pelphrey, K.A., & Reznick, J.S. (2001). Clothing a model of embodiment. *Behavioral and Brain Sciences*, 24(1), 59.
- Perrin, K.M., & Dorman, K.A. (2003). Teen parents and academic success. *Journal of School Nursing*, 19(5), 288-293.
- Pesut, B. (2003). Developing spirituality in the curriculum: worldviews, intrapersonal connectedness, interpersonal connectedness. *Nursing Education Perspectives*, 24(6), 290-294.
- Peterson, A.C. (2008). Spiritual development in adolescence: Toward enriching theories, research, and professional practice. *New Directions for Youth Development, Summer 2008*(118), 119-130.
- Pew Research Center. (2009, July 15). Demographics of internet users Retrieved September 17, from <http://www.pewinternet.org/Trend-Data/Whos-Online.aspx>
- Pfeifer, R., & Scheier, C. (1999). *Understanding intelligence*. Cambridge, MA: MIT Press.
- Pfund, R. (2000). Review: Nurturing a child's spirituality. *Journal of Child Health Care*, 4(4), 143-148.
- Pittman, K., Garza, P., Yohalam, N., & Artman, S. (2008). Addressing spiritual development in youth development programs and practices: Opportunities and challenges. *New Directions for Youth Development, Summer 2008*(118), 29-44.
- Plianbangchang, S. (2007). Message from the Regional Director *1st World Convention on Science and Spirituality* (pp. 1-2). New Delhi, India: World Health Organization: Regional Office for South-East Asia.
- Polit, D.F., & Hungler, B.P. (1995). The analysis of qualitative data *Nursing research: Principles and methods* (5th ed., pp. 517-536). Philadelphia: Lippencott.

- Pollock, D.C., & Van Reken, R.E. (2001). *Third culture kids: The experience of growing up among worlds*. Boston: Nicholas Brealey Publishing.
- Pravikoff, D.S., Tanner, A.B., & Pierce, S.T. (2005). Readiness of U.S. nurses for evidence-based practice. *American Journal of Nursing*, 105(9), 40-51.
- Pullen, L., Modrcin-Talbott, M.A., West, W.R., & Muenchen, R. (1999). Spiritual high vs. high on spirits: Is religiosity related to adolescent alcohol and drug use? *Journal of Psychiatric and Mental Health Nursing*, 6, 3-8.
- Quinn, J. (2008). Perspectives on spiritual development as part of youth development. *New Directions for Youth Development*, Summer 2008(118), 73-77.
- Rasic, D.T., Belik, S.-L., Elias, B., Katz, L.Y., Enns, M., & Sareen, J. (2008). Spirituality, religion and suicidal behavior in a nationally representative sample. *Journal of Affective Disorders*, 114, 32-40.
- Resnick, M.D., Harris, L.J., & Blum, R.W. (1993). The impact of caring and connectedness on adolescent health and well-being. *Journal of Paediatric Child Health*, 29(1), S3-S9.
- Rew, L., & Wong, J. (2006). A systematic review of associations among religiosity/spirituality and adolescent health attitudes and behaviors. *Journal of Adolescent Health*, 38, 433-442.
- Rex Smith, A. (2009). Nursing and spirituality: What happened to religion? *Journal of Christian Nursing*, 26(4), 216-222.
- Rich, M., & Ginsburg, K.R. (1999). The reason and rhyme of qualitative research: Why, when, and how to use qualitative methods in the study of adolescent health. *Journal of Adolescent Health*, 25(6), 371-378.
- Richards, L., & Morse, J.M. (2007). *Readme first for a users' guide to qualitative methods* (2nd ed.). Thousand Oaks: Sage.
- Rideout, V. (2001). Generation Rx.com: How young people use the Internet for health information. Menlo Park, CA: Kaiser Family Foundation.

- Ritt-Olson, A., Milam, J., Unger, J.B., Trinidad, D., Teran, L., Dent, C.W. et al. (2004). The protective influence of spirituality and "health-as-a-value" against monthly substance use among adolescents varying in risk. *Journal of Adolescent Health, 34*(3), 192-199.
- Roberts, P.D. (2001). Cooperative field theory is critical for embodiment. *Behavioral and Brain Sciences, 24*(1), 59-60.
- Roberts, R.E., Attkinsson, C.C., & Rosenblatt, A. (1998). Prevalence of psychopathology among children and adolescents. *American Journal of Psychology, 155*, 715-725.
- Roberts, R.E., Lewinsohn, P.M., & Seeley, J.R. (1995). Symptoms of DSM-III-R major depression in adolescence: Evidence from an epidemiological survey. *Journal of the American Academy of Child Adolescent Psychiatry, 34*, 1608-1617.
- Roche, K.M., Ahmed, S., & Blum, R.W. (2008). Enduring consequences of parenting for risk behaviors from adolescence into early adulthood. *Social Science and Medicine, 66*, 2023-2034.
- Rodgers, B.L. (1989). Concepts, analysis and the development of nursing knowledge: the evolutionary cycle. *Journal of Advanced Nursing, 14*, 330-335.
- Rodgers, B.L. (2000). Concept analysis: An evolutionary view. In B. L. Rodgers & K. A. Knafl (Eds.), *Concept development in nursing: Foundations, techniques, and applications* (2nd ed., pp. 77-102). Philadelphia, PA: Saunders.
- Rubin, D., Desai, N., Graham-Pole, J., Dodd, M., & Pollock, B. (2009). Spirituality in well and ill adolescents and their parents: The use of two assessment scales. *Pediatric Nursing, 35*(1), 37-42.
- Ryan, M., Carlton, K.H., & Sli, N.S. (2002). The online learning community. In D. M. Billings (Ed.), *Conversations in E-learning* (pp. 153-158). Pensacola: Pohl Publishing, Inc.
- Salsman, J.M., Brown, T.L., Brechting, E.H., & Carlson, C.R. (2005). The link between religion and spirituality and psychological adjustment: The mediating role of optimism and social support. *Personality and Social Psychology Bulletin, 31*(4), 522-535.

- Sanci, L.A., Kang, M.S., & Ferguson, B.J. (2005). Improving adolescents' access to primary health care. *Medical Journal of Australia*, 183(8), 416-417.
- Sani, F., & Bennet, M. (2004). Developmental aspects of social identity. In M. Bennet & F. Sani (Eds.), *The development of the social self* (pp. 77-100). New York: Psychology Press.
- Sartre, J.-P. (1984/1943). *Being and nothingness: A phenomenological essay on ontology* (H. E. Barnes, Trans.). New York: Washington Square Press.
- Sartre, J.-P. (2007/1947). *Existentialism is a humanism* (C. Macomber, Trans.). New Haven: Yale University Press.
- Satterly, L. (2001). Guilt, shame, and religious and spiritual pain. *Holistic Nursing Practice*, 15(92), 30-39.
- Scales, P.C., Benson, P.L., Leffert, N., & Blyth, D.A. (2000). Contribution of developmental assets to the prediction of thriving among adolescents. *Applied Developmental Science*, 4, 27-46.
- Schwartz, P.D., Maynard, A.M., & Uzelac, S.M. (2008). Adolescent egocentrism: A contemporary view. *Adolescence*, 43(171), 441-448.
- Scollin, P.A. (2001). A study of factors related to the use of online resources by nurse educators. *Computers in Nursing*, 19(6), 249-256.
- Scottish Executive Health Department. (2002). Guidelines on chaplaincy and spiritual care in the NHS in Scotland (pp. 1-48). Edinburgh: National Health Service.
- Selfhout, M.H.W., Branje, S.J.T., & Meeus, W.H.J. (2009). Developmental trajectories of perceived friendship intimacy, constructive problem solving, and depression from early to late adolescence. *Journal of Abnormal Child Psychology*, 37, 251-265.
- Sexson, S.B. (2004). Religious and spiritual assessment of the child and adolescent. *Child and Adolescent Psychiatric Clinics of North America*, 13, 35-47.

- Shek, D.T.L., Siu, A.M.H., Cheng, H., Tsang, S., Lui, J., & Lung, D. (2006). Development and validation of a positive youth development scale in Hong Kong. *International Journal of Adolescent Medical Health, 18*(3), 547-558.
- Shelly, J.A., & Miller, A.B. (1999). *Called to care: A Christian theology of nursing*. Downers Grove: InterVarsity Press.
- Shih, F.J., Gau, M.L., Mao, H.C., Chen, C.H., & Lo, C.H.K. (2001). Empirical validation of a teaching course on spiritual care in Taiwan. *Journal of Advanced Nursing, 36*(3), 333-346.
- Sim, T., Jordan-Gree, L., & Wolfman, J. (2005). Parents' perception of the effects of church involvement on adolescent substance use. *Journal of Religion and Health, 44*(3), 291-301.
- Simmonds, J.G. (2005). Other than "the set pattern": Developing one's own thoughts about spirituality and religion. *Mental Health, Religion, & Culture, 8*(4), 239-251.
- Sire, J.W. (2004). *Naming the elephant: Worldview as a concept*. Downers Grove: Intervarsity Press.
- Smith, C., & Denton, M.L. (2009). *Soul searching: The religious and spiritual lives of American teenagers*. New York: Oxford University Press.
- Smith, C., Denton, M.L., & Faris, R. (2002). Mapping American adolescent religious participation. *Journal of Scientific Study of Religion, 41*(597), 612.
- Smith, C.D. (1994). *The Absentee American*. Putnam Valley, NY: Aletheia Publications.
- Smith, J., & McSherry, W. (2004). Spirituality and child development: A concept analysis. *Journal of Advanced Nursing, 45*(3), 307-315.
- Smith, L., & Gasser, M. (2005). The development of embodied cognition: Six lessons from babies. *Artificial Life, 11*, 13-29.

- Smith, M.A., & Leigh, B. (1997). Virtual subjects: Using the Internet as an alternative source of subjects and research environment. *Behavior Research Methods, Instruments, and Computers*, 29(4), 496-505.
- Smuts, J.C. (1926). *Holism and evolution*. New York: McMillan.
- Social Media Today. (2009, March 5). Twitter demographics Retrieved September 17, from <http://www.socialmediatoday.com/SMC/78505>
- Speck, P. (2005). The evidence base for spiritual care. *Nursing Management*, 12(6), 28-31.
- Speziale, H.J., & Carpenter, D.R. (2007). *Qualitative research in nursing, advancing the humanistic perspective* (4th ed.). Philadelphia: Lippincott, Williams and Wilkins.
- Stanworth, R. (1997). Spirituality, language and depth of reality. *International Journal of Palliative Nursing*, 3(1), 19-22.
- Stearns, M. (1967). *Goethe: Pattern of genius*. New York: Franklin Watts, Inc.
- Steen, S., & Anderson, B. (1995). Ages and stages. *Journal of Christian Nursing*, 12(2), 6-11.
- Steinman, K.J., & Zimmerman, M.A. (2004). Religious activity and risk behavior among African American adolescents: Concurrent and developmental effects. *American Journal of Community Psychology*, 33, 151-161.
- Steuer, D. (2002). *In defense of experience: Goethe's natural investigations and scientific culture*. Cambridge, United Kingdom: Cambridge University Press.
- Stewart, C. (2001). The influence of spirituality on substance use of college students. *Journal of Drug Education*, 31(4), 343-351.

- Stoller, E.P., Webster, N.J., Blixen, C.E., McCormick, R.A., Perzynski, A.T., Kanuch, S.W. et al. (2009). Lay management of chronic disease: A qualitative study of living with hepatitis C infection. *American Journal of Health Behaviors*, 33(4), 376-390.
- Strauss, A., & Corbin, J. (1998). *Basics of qualitative research, techniques and procedures for developing grounded theory* (2nd ed.). Thousand Oaks, CA: Sage.
- Strauss, A.L., & Corbin, J. (1990). *Basics of qualitative research: Grounded theory procedures and techniques*. Thousand Oaks: Sage.
- Streubert, H.J., & Carpenter, D. (1995). *Qualitative research in nursing: Advancing the imperative*. Philadelphia, PA: J. B. Lippincott.
- Stuber, M.L., Nader, K.O., Hauskamp, B.M., & Pynoos, R.S. (1996). Appraisal of life threat and acute trauma responses in pediatric bone marrow transplant patients. *Journal of Traumatic Stress*, 9(4), 673-686.
- Tan, P.P. (2005). The importance of spirituality among gay and lesbian individuals. *Journal of Homosexuality*, 49(2), 135-144.
- Tanti, C., Stuaks, A., Halloran, M., & Foddy, M. (2010). Social identity change: Shifts in social identity during adolescence. *Journal of Adolescence*, doi:10.1016/j.adolescence.2010.5.012.
- Tanyi, R.A. (2005). Spirituality and family nursing: spiritual assessment and interventions for families. *Journal of Advanced Nursing*, 53(3), 287-294.
- Tartaro, J., Luecken, L.J., & Gunn, H.E. (2005). Exploring heart and soul: Effects of religiosity/spirituality and gender on blood pressure and cortisol stress responses. *Journal of Health Psychology*, 10(6), 753-766.
- Thelen, E., Schoner, G., Scheier, C., & Smith, L.B. (2001). The dynamics of embodiment: A field theory of infant perseverative reaching. *Behavioral and Brain Sciences*, 24, 1-34.

- Turner-Musa, J., & Lipscomb, L.S. (2007). Spirituality and social support on health behaviors of African American undergraduates. *American Journal of Health Behaviors*, 31(5), 495-501.
- Vaughn, L. (2009). *Bioethics: Principles, issues, and cases*. New York: Oxford University Press.
- Vitale, E., Lotito, L., & Maglie, R.B. (2009). A psychoneuroendocrino-immune approach in the nursing treatment of anorexia and bulimia nervosa. *Immunopharmacology and Immunotoxicology*, 31(1), 39-50.
- Wahl, R.A., Cotton, S., & Harrison-Monroe, P. (2008). Spirituality, adolescent suicide, and the juvenile justice system. *Southern Medical Journal*, 101(7), 711-715.
- Walker, R.L., & Bishop, S. (2005). Examining a model of the relation between religiosity and suicidal ideation in a sample of African American and White college students. *Suicide and Life-Threatening Behavior*, 35(6), 630-639.
- Watson, J. (1985). *Nursing: Human science and human care*. Norwalk, CT: Appleton-Century-Crofts.
- Webb, E., Campbell, D., Schwartz, R., & Sechrest, L. (1966). *Unobtrusive measures*. Chicago: Rand McNally.
- Whitelegg, M. (2003). Goethean science: An alternative approach. *The Journal of Alternative and Complementary Medicine*, 9(2), 311-320.
- Wilkinson, E., & Willoughby, L.A. (1962). *Goethe: Poet and thinker*. New York: Barnes and Noble, Inc.
- Wilson, M. (2004). *A part of you so deep: What vulnerable adolescents have to say about spirituality*. Burlington, VT: New England Network for Child, Youth, and Family Services.
- Wilson, M., & Nicholson, K.S. (2008). Spiritual development with marginalized youth: A status report. *New Directions for Youth Development*, Summer 2008(118), 115-118.

- Winker, C.K. (1995). A systems view of health. In M. A. Frey & C. L. Sieloff (Eds.), *Advancing King's systems framework and theory of nursing* (pp. 35-45). Thousand Oaks: Sage.
- Wong, Y.J., Rew, L., & Slaikeu, K.D. (2006). A systematic review of recent research on adolescent religiosity/spirituality and mental health. *Issues in Mental Health Nursing*, 27, 161-183.
- Woods, S. (1998). A theory of holism for nursing. *Medicine, Healthcare, and Philosophy*, 1, 255-261.
- World Health Organization. (2006). *Report on the fourth meeting of the Regional Advisory Panel on Impacts of Drug Abuse*. Paper presented at the Regional office for the Eastern Mediterranean, Cairo, Egypt.
- Wright, H.H. (2006). *Finding safe passage: The experience of spirituality for adolescents*. Doctor of Philosophy Doctoral dissertation, University of Texas, Austin.
- Wu, P.L., & Chiou, W.B. (2008). Postformal thinking and creativity among late adolescents: A post-Piagetian approach. *Adolescence*, 43(170), 237-251.
- Wuest, J. (2007). Grounded theory: The method. In P. L. Munhall (Ed.), *Nursing Research* (4th ed., pp. 239-271). Boston: Jones and Bartlett.
- Yi, M.S., Britto, M.T., Sherman, S.N., Moyer, M.S., Cotton, S., Kotagal, U.R. et al. (2009). Health values in adolescents with or without inflammatory bowel disease. *The Journal of Pediatrics*, 154, 527-534.
- Youniss, J., & Yates, M. (1999). Youth service and moral-civic identity: A case for everyday morality. *Educational Psychology Review*, 14, 361-376.
- Ziv, A., Boulet, J.R., & Slap, G.B. (1999). Utilization of physician offices by adolescents in the United States. *Pediatrics*, 104, 35-42.